Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF MICHIGAN		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this ar amended filing

#### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Raymond First name  Joseph Middle name  Otis, III  Last name and Suffix (Sr., Jr., II, III)	Kristina First name  Lynn Middle name  Otis  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Kristina Lynn Owen
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9673	xxx-xx-2147

Raymond Joseph Otis, III Debtor 1 Debtor 2 Kristina Lynn Otis Case number (if known) About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs If Debtor 2 lives at a different address: Where you live 1725 West Goguac St. Battle Creek, MI 49015 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Calhoun County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, Over the last 180 days before filing this petition, I I have lived in this district longer than in any have lived in this district longer than in any other other district. district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

	otor 2 Kristina Lynn Otis	•			Case numb	DET (if known)			
Par									
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to the under	☐ Chapter	. 7						
		☐ Chapter	11						
		☐ Chapter	12						
		Chapter	13						
8.	How you will pay the fee	abou order a pre	t how you may pa . If your attorney -printed address	ay. Typically, if you are payi is submitting your payment	ng the fee yourself, you on your behalf, your atto	lerk's office in your local court for more details may pay with cash, cashier's check, or money orney may pay with a credit card or check with attach the Application for Individuals to Pay			
		☐ I request but is applied	uest that my fee not required to, es to your family	waive your fee, and may do size and you are unable to	est this option only if you so only if your income is bay the fee in installmen	are filing for Chapter 7. By law, a judge may, s less than 150% of the official poverty line that ts). If you choose this option, you must fill out (3B) and file it with your petition.			
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
	•		District	Whe	n	Case number			
			District	Whe	n	Case number			
			District	Whe	n	Case number			
10.	Are any bankruptcy	■ No							
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
			Debtor			Relationship to you			
			District	Whe	n	Case number, if known			
			Debtor			Relationship to you			
			District	Whe	n	Case number, if known			
11.	Do you rent your residence?	■ No.	Go to line 12.						
	residence:	☐ Yes.	Has your landlo	ord obtained an eviction judg	ment against you and d	o you want to stay in your residence?			
			□ No. Go	to line 12.					
				l out <i>Initial Statement About</i> otcy petition.	an Eviction Judgment A	gainst You (Form 101A) and file it with this			

Debtor 1 Debtor 2				Case number (if known)			
Part 3:	Report About Any Bu	sinesses \	ou Own as a Sole Proprie	etor			
of a	12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?						
bus	siness?	☐ Yes.	☐ Yes. Name and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.							
If you have more than one sole proprietorship, use a separate sheet and attach							
it to this petition.  Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))							
			_ •	Il Estate (as defined in 11 U.S.C. § 101(51B))			
				defined in 11 U.S.C. § 101(53A))			
				er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abov	e 			
Cha Bar you	you filing under apter 11 of the akruptcy Code and are a a small business otor?	deadlines operation	you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate eadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of perations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 11 U.S.C. 1116(1)(B).				
For	a definition of small	■ No.	I am not filing under Cha	pter 11.			
bus	usiness debtor, see 11 .S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part 4:	Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention			
	you own or have any	■ No.					
•	perty that poses or is ged to pose a threat	☐ Yes.					
	mminent and ntifiable hazard to		What is the hazard?				
	olic health or safety? do you own any						
pro	perty that needs nediate attention?		If immediate attention is needed, why is it needed?				
per live or a	example, do you own ishable goods, or stock that must be fed, a building that needs ent repairs?		Where is the property?				
3	,			Number, Street, City, State & Zip Code			

Case:16-05128-jtg Doc #:1 Filed: 10/07/2016 Page 5 of 73 Raymond Joseph Otis, III Debtor 1 Debtor 2 Case number (if known) Kristina Lynn Otis Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one. you have received a I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have this bankruptcy petition, but I do not have a certificate choices. If you cannot do a certificate of completion. so, you are not eligible to of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling ☐ I certify that I asked for credit counseling services you paid, and your from an approved agency, but was unable to obtain services from an approved agency, but was creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. request, and exigent circumstances merit a 30-day days after I made my request, and exigent circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you Your case may be dismissed if the court is filed for bankruptcy. dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: ☐ Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that that makes me incapable of realizing or makes me incapable of realizing or making rational making rational decisions about finances. decisions about finances. Disability. Disability. My physical disability causes me to be My physical disability causes me to be unable to unable to participate in a briefing in person, participate in a briefing in person, by phone, or by phone, or through the internet, even after I through the internet, even after I reasonably tried to reasonably tried to do so. do so. Active duty. Active duty. I am currently on active military duty in a I am currently on active military duty in a military

military combat zone.

If you believe you are not required to receive a

briefing about credit counseling, you must file a

motion for waiver credit counseling with the court.

combat zone.

of credit counseling with the court.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver

	otor 1 otor 2	Raymond Joseph Kristina Lynn Otis				Case nu	umber (if knowi	n)		
Par	t 6:	Answer These Questi	ons for Rep	orting Purposes						
16.	What you h	kind of debts do ave?		re your debts primarily consum dividual primarily for a personal, f			e defined in 1	1 U.S.C. § 101(8) as "incurred by an		
				No. Go to line 16b.						
				Yes. Go to line 17.						
				Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				No. Go to line 16c.						
				Yes. Go to line 17.						
			16c. S	tate the type of debts you owe that	at are not consur	ner debts or bus	siness debts			
17.		ou filing under ter 7?	■ No.	am not filing under Chapter 7. Go	to line 18.					
after a		ou estimate that any exempt erty is excluded and		am filing under Chapter 7. Do you re paid that funds will be available				xcluded and administrative expenses		
	admi	nistrative expenses		] No						
	be av	aid that funds will railable for		] Yes						
	distri credi	bution to unsecured tors?								
18. How many Creditors do			<b>1</b> -49		<b>1</b> ,000-5,000			25,001-50,000		
		you estimate that you owe?	☐ 50-99		☐ 5001-10,000 ☐ 10,001-25,00			l 50,001-100,000 l More than100,000		
□ 100-199 □ 200-999				10,001-23,00	00		I More than 100,000			
19.		much do you	□ \$0 - \$50,000		□ \$1,000,001 -	- \$10 million		1 \$500,000,001 - \$1 billion		
		timate your assets to worth?	\$50,001		□ \$10,000,001 □ \$50,000,001			l \$1,000,000,001 - \$10 billion l \$10,000,000,001 - \$50 billion		
			■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$100,000,001			l More than \$50 billion		
20.		much do you	□ \$0 - \$50	,000	□ \$1,000,001 -	- \$10 million		l \$500,000,001 - \$1 billion		
	estim to be	ate your liabilities ?		- \$100,000	□ \$10,000,001			\$1,000,000,001 - \$10 billion		
				1 - \$500,000 1 - \$1 million	□ \$50,000,001 □ \$100,000,00			l \$10,000,000,001 - \$50 billion l More than \$50 billion		
Dow	. 7.	Simo Dalaur								
Par		Sign Below	I hove even	singed this position, and I dealers w	nder nenelty of n	a a rivery that that i	information n	revided is true and sourcet		
FOI	you			nined this petition, and I declare u		• •	·			
If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.										
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						orney to help me fill out this		
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						this petition.			
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571.							
			/s/ Raymo	ond Joseph Otis, III		/s/ Kristina I				
			Raymond Signature o	Joseph Otis, III f Debtor 1		Kristina Lyn Signature of D				
			Executed o			Executed on		7 2016		
			_xoodiou 0	MM / DD / YYYY		_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MM / DD / Y			

For your attorney, if you are represented by one  I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to procure represented by one  If you are not represented by an attorney, you do not need to file this page.  If you are not represented by an attorney, you do not need to file this page.  Is Jeffrey D. Mapes  Printed name  Jeffrey D. Mapes  Printed name  29 Pearl St. NW, Ste. 305  Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone  (616) 719-3847  Email address  In the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to procure under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapt for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 34 and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.  Is Jeffrey D. Mapes  Printed name  Jeffrey D. Mapes  Printed name  29 Pearl St. NW, Ste. 305  Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone  (616) 719-3847  Email address  info@mapesdebt.com	Debtor 1 Raymond Joseph Debtor 2 Kristina Lynn Oti	· · · · · · · · · · · · · · · · · · ·	Case number (if known)			
schedules filed with the petition is incorrect.  /s/ Jeffrey D. Mapes Signature of Attorney for Debtor  Jeffrey D. Mapes Printed name Jeffrey D. Mapes PLC Firm name 29 Pearl St. NW, Ste. 305 Grand Rapids, MI 49503 Number, Street, City, State & ZIP Code Contact phone (616) 719-3847 Email address info@mapesdebt.com	represented by one	under Chapter 7, 11, 12, or 13 of title 11, United S for which the person is eligible. I also certify that I	tates Code, and have ell have delivered to the	explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
Signature of Attorney for Debtor  Jeffrey D. Mapes Printed name  Jeffrey D. Mapes PLC Firm name  29 Pearl St. NW, Ste. 305 Grand Rapids, MI 49503 Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509	an attorney, you do not need		rtify that I have no knov	vledge after an inquiry that the information in the		
Signature of Attorney for Debtor  Jeffrey D. Mapes Printed name  Jeffrey D. Mapes PLC Firm name  29 Pearl St. NW, Ste. 305 Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847  Email address info@mapesdebt.com  P70509		/s/ Jeffrey D. Mapes	Date	October 7, 2016		
Printed name  Jeffrey D. Mapes PLC  Firm name  29 Pearl St. NW, Ste. 305  Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509		Signature of Attorney for Debtor		MM / DD / YYYY		
Printed name  Jeffrey D. Mapes PLC  Firm name  29 Pearl St. NW, Ste. 305  Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509		Jeffrev D. Mapes				
Firm name  29 Pearl St. NW, Ste. 305 Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509						
29 Pearl St. NW, Ste. 305 Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509		Jeffrey D. Mapes PLC				
Grand Rapids, MI 49503  Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509						
Number, Street, City, State & ZIP Code  Contact phone (616) 719-3847 Email address info@mapesdebt.com  P70509		29 Pearl St. NW, Ste. 305				
Contact phone (616) 719-3847 Email address info@mapesdebt.com P70509						
P70509		Number, Street, City, State & ZIP Code				
		Contact phone (616) 719-3847	Email address	info@mapesdebt.com		
Bar number & State		P70509				
		Bar number & State				

Certificate Number: 00134-MIW-CC-027961993



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>August 24, 2016</u>, at <u>7:58</u> o'clock <u>PM EDT</u>, <u>Raymond Joseph Otis, III</u> received from <u>Cricket Debt Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Western District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: August 24, 2016 By: /s/Erika Poston

Name: Erika Poston

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 00134-MIW-CC-027968907



# **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>August 26, 2016</u>, at <u>9:16</u> o'clock <u>AM EDT</u>, <u>Kristina Lynn Otis</u> received from <u>Cricket Debt Counseling</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Western District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: August 26, 2016 By: /s/Margaret Thomas

Name: Margaret Thomas

Title: Counselor

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inform	ation to identify your c	ase:				
Deb	otor 1	Raymond Joseph	<del>-</del>	Last Name	_		
Del	otor 2	First Name  Kristina Lynn Otis	Middle Name	Last Name			
	use if, filing)	First Name	Middle Name	Last Name	-		
Uni	ted States Ban	kruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN			
Car	a numbar				_		
	se number own)					☐ Check	if this is an
						amend	ed filing
Su Be a	mmary of as complete ar rmation. Fill o	nd accurate as possible ut all of your schedules	e. If two married peoples first; then complete to	nd Certain Statistical Information and Certain Statistical Information on this form. If you are fict the box at the top of this page.	sponsible fo	or supplying	
Par	t 1: Summa	rize Your Assets					
						Your as	sets what you own
1.		B: Property (Official For				¢	57,000.00
	1a. Copy line	e 55, Total real estate, fro	om Schedule A/B			\$	37,000.00
	1b. Copy line	e 62, Total personal prop	erty, from Schedule A/B			\$	55,135.85
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	112,135.85
Par	t 2: Summa	rize Your Liabilities					
						Your lia Amount	<b>bilities</b> you owe
2.		Creditors Who Have Cla total you listed in Colum		ty (Official Form 106D) t the bottom of the last page of Part 1 of <i>Sc</i>	hedule D	\$	138,995.23
3.		F: Creditors Who Have U e total claims from Part 1		al Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	963.50
	3b. Copy the	e total claims from Part 2	(nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	74,468.00
				Your total	al liabilities	\$	214,426.73
Par	t 3: Summa	rize Your Income and I	Expenses				·
	-		•				
4.	Copy your co	•	from line 12 of Schedul	le I		\$	5,854.83
5.		Your Expenses (Official Founthly expenses from lin				\$	4,956.00
Par	t 4: Answer	These Questions for A	Administrative and Sta	tistical Records			
6.	-	g for bankruptcy under have nothing to report o	•	<b>?</b> Check this box and submit this form to the c	ourt with yo	ur other sch	edules.
7.	Yes What kind of	f debt do you have?					
				r debts are those "incurred by an individual   9g for statistical purposes. 28 U.S.C. § 159		a personal,	family, or
		ebts are not primarily control of the control of th		ave nothing to report on this part of the form	n. Check this	box and su	bmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

	Raymond Joseph Otis, III	
Debtor 2	Kristina Lynn Otis	Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,805.50

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	238.50
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	725.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	963.50

	Case	.10-03120-ji	y L	70C #.1	Filed. 10/07/2010	raye 1	.2 01 73	
Fill in this informa	ation to identify	your case and th	is filin	g:				
Debtor 1		seph Otis, III						
Dahtar 0	First Name		Name		Last Name	_		
Debtor 2 (Spouse, if filing)	Kristina Lyn First Name		Name		Last Name			
United States Bank	cruptcy Court for	the: WESTERN	DISTF	RICT OF MIC	CHIGAN			
Coco numbor								П о
Case number								☐ Check if this is an amended filing
000 : 15	4004/5							
Official For		_						
<u>Schedule</u>					If an asset fits in more than o			12/15
1. Do you own or ha	2.	uitable interest in a	iny resid	dence, buildi	ing, land, or similar property?			
1.1  1725 West ( Street address, if a	Goguac St. available, or other des	cription	Wha	Single-fam  Duplex or i	perty? Check all that apply nily home multi-unit building ium or cooperative	the amoun	t of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ms Secured by Property.
Dattle Ones		40045 0000			rred or mobile home	Current va		Current value of the
Battle Cree	k MI State	49015-0000 ZIP Code		-	t proporty	entire proj	perty? 5 <b>7,000.00</b>	portion you own? \$57,000.00
Oity	Otato	Zii Gode			' ' '			
				Other _		_ (such as fe	ee simple, ten	our ownership interest ancy by the entireties, or
			Who	-	rest in the property? Check one	a life estat	te), if known.	
Calhoun				Debtor 1 o	•	1 66 31111	Pie	
County				-	and Debtor 2 only			
					ne of the debtors and another		k if this is con structions)	nmunity property
			Othe	er informatio	on you wish to add about this it cation number:	tem, such as lo	ocal	
			Prir	mary Resi	idence. Value = Zillow/S Date: 11/16/2004.	EV x 2.		
					es from Part 1, including ar			\$57,000.00
Part 2: Describe Yo	our Vehicles							

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

r 2 <u>K</u>	aymond Joseph Otis, III ristina Lynn Otis	C:	ase number (if known)	
s, vans,	trucks, tractors, sport utility	vehicles, motorcycles		
lo				
'es				
Make:	Chrylser	Who has an interest in the property? Check one	the amount of any secure	d claims on Schedule D:
Model:		Debtor 1 only	Creditors Who Have Clair	ns Secured by Property.
		=	Current value of the	Current value of the
			entire property?	portion you own?
		At least one of the debtors and another		
		Check if this is community property (see instructions)	\$7,053.00	\$7,053.00
Make:	Dodge	Who has an interest in the property? Check one		
Model:	Durango	Debtor 1 only		
Year:	2002	- <u>_</u>		
	nate mileage: 140000		Current value of the entire property?	Current value of the portion you own?
Other inf		At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$1,058.00	\$1,058.00
	Dodge	Will be a state of the state of	Do not deduct secured cla	aims or exemptions. Put
		- <u> </u>	the amount of any secure	d claims on Schedule D:
			Creditors Who Have Clair	ns Secured by Property.
	40000	- <u>-</u>	Current value of the	Current value of the
	mate mileage.	_ Debitor Failu Debitor 2 offiy	entire property?	portion you own?
		☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$21,213.00	\$21,213.00
Make:	Suzuki	Who has an interest in the property? Check one		
Model:	Boulevard	■ Debtor 1 only		
Year:	2005	Debtor 2 only	Current value of the	Current value of the
Approxin	nate mileage: 6500		entire property?	portion you own?
Other inf	ormation:	☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$1,960.00	\$1,960.00
	Make: Model: Year: Approxin Other inf KBB V Acquis  Make: Model: Year: Approxin Other inf KBB V Acquis  Make: Model: Year: Approxin Other inf KBB V Acquis  Make: Model: Year: Approxin Other inf KBB V Acquis	Make: Chrylser  Model: 200  Year: 2013  Approximate mileage: 60000 Other information:  KBB Value. Good Condition. Acquisition Date: 5/6/2016.  Make: Dodge  Model: Durango Year: 2002  Approximate mileage: 140000 Other information:  KBB Value. Fair Condition. Acquisition Date: 12/20/2013.  Make: Dodge  Model: Durango Year: 2015  Approximate mileage: 40000 Other information:  KBB Value. Good Condition. Acquisition Date: 8/18/2016.  Make: Suzuki Model: Boulevard Year: 2005	Make: Chrylser  Model: 200    Debtor 1 only	Make: Chrylser  Model: 200    Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 3 only   Current value of the entire property?    Make: Dodge   Debtor 1 only   Current value of the amount of any secure creditors Who has an interest in the property? Check one   Do not deduct secured cit the amount of any secure creditors who have Clair value of the entire property?    Make: Dodge   Debtor 1 and Debtor 2 only   Current value of the entire property?    Make: Dodge   Debtor 1 only   Current value of the entire property?    Make: Dodge   Debtor 1 only   Current value of the entire property?    Debtor 1 only   Current value of the entire property?    Debtor 2 only   Debtor 2 only   Current value of the entire property?    Debtor 1 only   Current value of the entire property?    Debtor 2 only   Current value of the entire property?    At least one of the debtors and another   Salpos value   Salpos

Debtor 1 Debtor 2	Raymond Joseph Otis, III  Kristina Lynn Otis  Case number (if known	)
	e dollar value of the portion you own for all of your entries from Part 2, including any entries for you have attached for Part 2. Write that number here=>	\$34,284.00
Part 3:	escribe Your Personal and Household Items	
	wn or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
Exam □ No	nold goods and furnishings  bles: Major appliances, furniture, linens, china, kitchenware  Describe	
	Household goods and furnishings, no item w/ value >\$550.	\$1,000.00
□ No	nics  les: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music including cell phones, cameras, media players, games  Describe	collections; electronic devices
	TVs, computer, cell phones, game console, misc. consumer electronics.	\$600.00
Exam □ No	<ul> <li>ibles of value</li> <li>oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles</li> <li>Describe</li> </ul>	n, or baseball card collections;
	Comic book collection.	\$60.00
Exam ■ No	nent for sports and hobbies  les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments  . Describe	s and kayaks; carpentry tools;
■ No	ms  ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe	
☐ No	es  pples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe	
	Wardrobe/accessories.	\$400.00
□ No	ry  ples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,  Describe	gold, silver
■ Yes	Wedding bands, watches, rings, pearls, costume jewelry.	\$200.00

	ebtor 1 ebtor 2	Raymond Jo Kristina Lyn		tis, III	Case number (if known)	
	Exam <sub>l</sub> □ No	nrm animals ples: Dogs, cats, I Describe	oirds, ho	rses		
			1 dog	, 2 cats, pond fis	h (Koi).	\$1,300.00
	■ No □ Yes.	Give specific info	ormation		not already list, including any health aids you did not list	
15					Part 3, including any entries for pages you have attached	\$3,560.00
Pa	rt 4: De	scribe Your Finance	cial Asse	ts		
Do	you ov	wn or have any le	egal or e	quitable interest in	n any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16.	■ No			our wallet, in your h	ome, in a safe deposit box, and on hand when you file your petition	nc
17.	Exam <sub>l</sub>				ounts; certificates of deposit; shares in credit unions, brokerage has with the same institution, list each.  Institution name:	ouses, and other similar
			17.1.	Checking	Huntington Bank X0042	\$1,705.75
			17.2.	Savings	Huntington Bank X6736	\$2.00
			17.3.	Savings	Omni Community Credit Union X7719	\$5.00
			17.4.	Checking	Omni Community Credit Union X7719-030	\$0.00
			17.5.	Checking	PNC Bank X2877	\$995.51
			17.6.	HSA	Fifth Third Bank X7768	\$151.87
18.	_Exam <sub> </sub>			cly traded stocks ent accounts with br	okerage firms, money market accounts	
	■ No □ Yes			Institution or issuer	name:	
19.	-	ublicly traded sto venture	ock and	interests in incorp	orated and unincorporated businesses, including an interes	t in an LLC, partnership, and

Debtor 1 Debtor 2	Raymond Joseph Otis, III Kristina Lynn Otis		Case number (i	f known)	
■ Yes	. Give specific information about them Name of entity:		% of ownershi	p:	
	Otis Oasis		100	_ %	\$1.00
Nego Non-r ■ No	rnment and corporate bonds and other neg tiable instruments include personal checks, ca negotiable instruments are those you cannot tree. Give specific information about them Issuer name:	shiers' checks, promissory notes, ar	nd money orders.		
	ment or pension accounts uples: Interests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or ot	her pension or profit-	sharing plans	
■ Yes	List each account separately.  Type of account:	Institution name:			
	401k	Firekeepers Developme Account.	ent Retirement		\$13,889.00
<i>Exam</i> ■ No	share of all unused deposits you have made s ples: Agreements with landlords, prepaid rent	, ,	telecommunications	companies, or	others
■ No	ties (A contract for a periodic payment of mor	ney to you, either for life or for a num	ber of years)		
24. Interes	Issuer name and description.	qualified ABLE program, or under	a qualified state tui	ition program.	
26 U.S ■ No	.C. §§ 530(b)(1), 529A(b), and 529(b)(1).				
	Institution name and description	on. Separately file the records of any	interests.11 U.S.C.	§ 521(c):	
■ No	s, equitable or future interests in property (	other than anything listed in line 1	l), and rights or pov	vers exercisab	ole for your benefit
Exam	ts, copyrights, trademarks, trade secrets, a ples: Internet domain names, websites, proce		eements		
■ No □ Yes	. Give specific information about them				
	ses, franchises, and other general intangib ples: Building permits, exclusive licenses, coo		licenses, profession	al licenses	
☐ Yes.	. Give specific information about them				
Money or	property owed to you?			p	Current value of the cortion you own? On not deduct secured

Official Form 106A/B Schedule A/B: Property page 5

claims or exemptions.

	ebtor 1 ebtor 2	Raymond Joseph Otis, III Kristina Lynn Otis		Ca	se number (if known)	
28.	□ No	unds owed to you				
	Yes. 0	Give specific information about the	em, including whether you already file	d the returns and	the tax years	
			Anticipated/Accrued 2016 Tax prorated . Debtors usuall	Refunds, y owe.	Federal and State	\$0.00
29.	■ No		y, spousal support, child support, mai	ntenance, divorce	settlement, property settle	ement
30.	Example  No	mounts someone owes you les: Unpaid wages, disability insu benefits; unpaid loans you m	rance payments, disability benefits, si ade to someone else	ck pay, vacation p	ay, workers' compensatio	on, Social Security
31.	Interest	s in insurance policies	ance; health savings account (HSA);	credit, homeowner	r's, or renter's insurance	
	Yes. N	Name the insurance company of e Company n		Beneficiary:		Surrender or refund value:
		Life insur cash valu	ance through employer, no e (term)	Raymond	Otis III	\$1.00
		Life insur cash valu	ance through employment, no e (term)	Kristina O	itis	\$1.00
		Prudentia	l	Deborah (	Owen	\$538.72
		State Fari	n - term policy	Kristina O	rtis	\$1.00
32.	If you a someor	erest in property that is due you re the beneficiary of a living trust, ne has died.  Give specific information	a from someone who has died expect proceeds from a life insuranc	e policy, or are cu	rrently entitled to receive p	property because
	Example ■ No	les: Accidents, employment dispu	or not you have filed a lawsuit or mates, insurance claims, or rights to sue		r payment	
		Describe each claim				
34.	■ No	ontingent and unliquidated clai	ms of every nature, including cour	terclaims of the	debtor and rights to set	off claims
35.	■ No	ancial assets you did not alread	ly list			

Debt Debt			Case number (if known)	
	Add the dollar value of all of your entries from Part 4, includi			\$17,291.85
Part !	Describe Any Business-Related Property You Own or Have an International Control of the Control o	erest In. List any real esta	ate in Part 1.	
37. <b>D</b> e	you own or have any legal or equitable interest in any business-rela	ated property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part (	Describe Any Farm- and Commercial Fishing-Related Property Yolf you own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interes	st In.	
46. <b>D</b>	o you own or have any legal or equitable interest in any farm	n- or commercial fishir	ng-related property?	
ı	No. Go to Part 7.			
I	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	ou Did Not List Above		
	o you have other property of any kind you did not already lis Examples: Season tickets, country club membership	et?		
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$57,000.00
56.	Part 2: Total vehicles, line 5	\$34,284.00		
57.	Part 3: Total personal and household items, line 15	\$3,560.00		
58.	Part 4: Total financial assets, line 36	\$17,291.85		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+\$0.00		
62.	Total personal property. Add lines 56 through 61	\$55,135.85	Copy personal property to	otal <b>\$55,135.85</b>
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$112,135.85

F	I in this information to identify your case:				
De	ebtor 1 Raymond Joseph Otis, I	III			
De	First Name N	Middle Name	L	Last Name	
		Middle Name	L	ast Name	
Un	ited States Bankruptcy Court for the: WEST	TERN DISTRICT OF M	1ICHI	GAN	
	nown)				☐ Check if this is an amended filing
$\bigcirc$	fficial Form 106C				
	fficial Form 106C				
5	chedule C: The Proper	rty You Cla	ıım	as Exempt	4/16
the nee cas	as complete and accurate as possible. If two m property you listed on <i>Schedule A/B: Property</i> ded, fill out and attach to this page as many coe number (if known).	(Official Form 106A/B) opies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	claim as exempt. If more space is additional pages, write your name and
spe any fun exe	each item of property you claim as exempt ecific dollar amount as exempt. Alternatively applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. How emption to a particular dollar amount and the he applicable statutory amount.	y, you may claim the f ns—such as those for wever, if you claim an	ull fa heal exer	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	eing exempted up to the amount of penefits, and tax-exempt retirement are under a law that limits the
Pa	rt 1: Identify the Property You Claim as E	Exempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	-	empt.	fill in the information below.	
	Brief description of the property and line on	Current value of the Amount of the exemption you claim			Specific laws that allow exemption
	Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
De	ebtor 1 Exemptions 2005 Suzuki Boulevard 6500 miles NADA Value, Good Condition.	\$1,960.00		\$1,960.00	11 U.S.C. § 522(d)(2)
	Acquisition Date: 9/6/2016. Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	
	2005 Jayco Jay Series M-1207 NADA Value, Good Condition.	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(5)
	Acquisition Date: 8/6/2015. Line from <i>Schedule A/B</i> : <b>4.1</b>			100% of fair market value, up to any applicable statutory limit	
	Household goods and furnishings, no item w/ value >\$550.	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	TVs, computer, cell phones, game console, misc. consumer electronics.	\$600.00		\$300.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
	Comic book collection. Line from Schedule A/B: 8.1	\$60.00		\$60.00	11 U.S.C. § 522(d)(3)
	LING HOTH GOTTEGUIE A/D. U. I		П	100% of fair market value up to	

any applicable statutory limit

Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption	
		Copy the value from	Che	eck only one box for each exemption.	
		Schedule A/B			
	Wardrobe/accessories. Line from Schedule A/B: 11.1	\$400.00		\$200.00	11 U.S.C. § 522(d)(3)
	Lille Holli Schedule A.B. TTT			100% of fair market value, up to any applicable statutory limit	
	Wedding bands, watches, rings, pearls, costume jewelry.	\$200.00		\$100.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
	1 dog, 2 cats, pond fish (Koi). Line from Schedule A/B: 13.1	\$1,300.00		\$650.00	11 U.S.C. § 522(d)(3)
	Ellie Holli Schedule Alb. 19.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Huntington Bank X0042 Line from Schedule A/B: 17.1	\$1,705.75		\$852.88	11 U.S.C. § 522(d)(5)
	Ellio Iloni odinodale i Vizi			100% of fair market value, up to any applicable statutory limit	
	Savings: Huntington Bank X6736 Line from Schedule A/B: 17.2	\$2.00		\$1.00	11 U.S.C. § 522(d)(5)
	Ellie Holli Goriedale 7VE. TTIE			100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank X2877 Line from Schedule A/B: 17.5	\$995.51		\$995.51	11 U.S.C. § 522(d)(5)
	Ellie Holli Genedale Al D. 1710			100% of fair market value, up to any applicable statutory limit	
	Otis Oasis 100 % ownership	\$1.00		\$1.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit	
	Life insurance through employment, no cash value (term)	\$1.00		\$1.00	11 U.S.C. § 522(d)(7)
	Beneficiary: Kristina Otis Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	State Farm - term policy Beneficiary: Kristina Otis	\$1.00		100%	11 U.S.C. § 522(d)(7)
	Line from Schedule A/B: 31.4			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 ■ No ■ Yes. Did you acquire the property covere ■ No ■ Yes	3 years after that for ca	ises fi	•	,

Fil	I in this information to identify your case:				
De	ebtor 1				
Do		liddle Name	L	ast Name	
		fiddle Name	L	ast Name	
Un	ited States Bankruptcy Court for the: WEST	ERN DISTRICT OF M	IICHIO	GAN	
	ise number inown)				☐ Check if this is an amended filing
	fficial Form 106C chedule C: The Proper	tv You Cla	im	as Exempt	4/16
	•			·	
the nee	as complete and accurate as possible. If two m property you listed on <i>Schedule A/B: Property</i> ided, fill out and attach to this page as many coe number (if known).	(Official Form 106A/B)	as yo	our source, list the property that you	ı claim as exempt. If more space is
spe any fun exe	each item of property you claim as exempt, ecific dollar amount as exempt. Alternatively applicable statutory limit. Some exemption ds—may be unlimited in dollar amount. How emption to a particular dollar amount and the applicable statutory amount.	y, you may claim the f is—such as those for vever, if you claim an	ull fai healt exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the
Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	our spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt.	fill in the information below.	
	Brief description of the property and line on	Specific laws that allow exemption			
	Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B		eck only one box for each exemption.	opcomo una una anon oxomption
De	ebtor 2 Exemptions	Scriedule A/B			
De	2005 Jayco Jay Series M-1207 NADA Value. Good Condition.	\$3,000.00		\$1,500.00	11 U.S.C. § 522(d)(5)
	Acquisition Date: 8/6/2015. Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	
	Household goods and furnishings, no item w/ value >\$550.	\$1,000.00		\$500.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: <b>6.1</b>			100% of fair market value, up to any applicable statutory limit	
	TVs, computer, cell phones, game console, misc. consumer electronics.	\$600.00		\$300.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
	Wardrobe/accessories. Line from Schedule A/B: 11.1	\$400.00		\$200.00	11 U.S.C. § 522(d)(3)
				100% of fair market value, up to any applicable statutory limit	
	Wedding bands, watches, rings, pearls, costume jewelry.	\$200.00		\$100.00	11 U.S.C. § 522(d)(4)
	Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	1 dog, 2 cats, pond fish (Koi). Line from Schedule A/B: 13.1	\$1,300.00		\$650.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Huntington Bank X0042 Line from Schedule A/B: 17.1	\$1,705.75		\$852.87	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Savings: Huntington Bank X6736 Line from Schedule A/B: 17.2	\$2.00		\$1.00	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	Savings: Omni Community Credit Union X7719	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
	HSA: Fifth Third Bank X7768 Line from Schedule A/B: 17.6	\$151.87		\$151.87	11 U.S.C. § 522(d)(5)
				100% of fair market value, up to any applicable statutory limit	
	401k: Firekeepers Development Retirement Account.	\$13,889.00		\$13,889.00	11 U.S.C. § 522(d)(12)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	Life insurance through employer, no cash value (term)	\$1.00		\$1.00	11 U.S.C. § 522(d)(7)
	Beneficiary: Raymond Otis III Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
	Prudential Beneficiary: Deborah Owen	\$538.72	•	\$538.72	11 U.S.C. § 522(d)(8)
	Line from Schedule A/B: 31.3			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every 3 No			led on or after the date of adjustme	nt.)
	Yes. Did you acquire the property covered No	ed by the exemption wi	thin 1	,215 days before you filed this case	?
	☐ Yes				

Fill in this informa	tion to identify you	r case:			
Debtor 1	Raymond Josep			-	
Dahtana	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	Kristina Lynn Ot	Middle Name Last Name		-	
	ruptcy Court for the:	WESTERN DISTRICT OF MICHIGAN			
				-	
Case number				_	if this is an led filing
Official Form	106D				3
-		Who Have Claims Secur	ad by Drapart	.,	40/45
Schedule L	o: Creditors	Who Have Claims Secur	ed by Propert	у	12/15
		f two married people are filing together, both are out, number the entries, and attach it to this form			
1. Do any creditors ha	ave claims secured by	your property?			
☐ No. Check the	nis box and submit th	is form to the court with your other schedules	s. You have nothing else t	to report on this form.	
Yes. Fill in a	Il of the information b	pelow.	•		
	Secured Claims				
		para than and appured plains list the arealitar appare	Column A	Column B	Column C
for each claim. If more	e than one creditor has	nore than one secured claim, list the creditor separa a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.		Value of collateral that supports this claim	Unsecured portion If any
2.1 Bank of Am	erica	Describe the property that secures the claim:	\$68,750.00	\$57,000.00	\$11,750.00
Creditor's Name	2235	1725 West Goguac St. Battle Creek, MI 49015 Calhoun County Primary Residence. Value = Zillow/SEV x 2. Acquisition Date: 11/16/2004. As of the date you file, the claim is: Check all that apply.			
El Paso, TX	79998	☐ Contingent			
Number, Street, C	ity, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the debt	? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 2 only ☐ Debtor 1 and Debt	for 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	١		
At least one of the		☐ Judgment lien from a lawsuit	,		
☐ Check if this clair	m relates to a	Other (including a right to offset) First Mo	rtgage		
Date debt was incurr	Reported 8/2016.	Last 4 digits of account number 469	00		
Department Treasury/IR		Describe the property that secures the claim:	\$2,595.62	\$0.00	\$2,595.62
Creditor's Name		Income Taxes Past Due.			
Internal Rev Cincinnati,	venue Service OH 45999	As of the date you file, the claim is: Check all that apply.  Contingent	_		
Number, Street, C	ity, State & Zip Code	Unliquidated			
Who ower the debt	2 Chook and	Disputed			
Who owes the debt  Debtor 1 only	и опеск опе.	Nature of lien. Check all that apply.  ☐ An agreement you made (such as mortgage or	socured		
■ Debtor 1 only ■ Debtor 2 only		An agreement you made (such as mortgage or car loan)	Secureu		
■ Debtor 2 only  ■ Debtor 1 and Debt	or 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
At least one of the	•	☐ Judgment lien from a lawsuit	,		

Official Form 106D

Debtor 1 Raymond Joseph Otis, I		Case number (if know)		
Prirst Name Middle National Debtor 2 Kristina Lynn Otis	ame Last Name			
First Name Middle Na	ame Last Name			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2015	Last 4 digits of account number 9673			
2.3 Department of the Treasury/IRS	Describe the property that secures the claim:	\$2,915.14	\$0.00	\$2,915.14
Creditor's Name	Income Taxes Past Due.			
Internal Bassansa Camina	As of the date you file, the claim is: Check all that			
Internal Revenue Service Cincinnati, OH 45999	apply.			
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
rumber, etreet, etty, etate a zip eeae	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
■ Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community dept				
Date debt was incurred 2013.	Last 4 digits of account number 9673			
Department of the				
2.4 Department of the Treasury/IRS	Describe the property that secures the claim:	\$3,756.04	\$0.00	\$3,756.04
Creditor's Name				
	As of the date you file, the claim is: Check all that			
PO Box 24035 Fresno, CA 93779	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, Oity, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Tax lien			
•				
Date debt was incurred 2013	Last 4 digits of account number 9673			
Department of				
2.5 Treasury/IRS	Describe the property that secures the claim:	\$6,551.31	\$0.00	\$6,551.31
Creditor's Name				
STOP 6692 AUSC				
310F 009Z AU3C	As of the date you file, the claim is: Check all that			
	apply.			
Austin, TX 73301	apply.  Contingent			
	apply.			
Austin, TX 73301	apply.  Contingent  Unliquidated			
Austin, TX 73301  Number, Street, City, State & Zip Code	apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mortgage or see	cured		
Austin, TX 73301  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.	cured		

Official Form 106D Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor 1 Raymond Joseph Otis,		C	ase number (if know)		
First Name Middle N Debtor 2 Kristina Lynn Otis	lame Last Name				
First Name Middle N	lame Last Name	_			
	D hadamant line from a lawarit				
☐ At least one of the debtors and another☐ Check if this claim relates to a	Judgment lien from a lawsuit	Tax Lien			
community debt	Other (including a right to offset)				
Date debt was incurred 2014	Last 4 digits of account nun	nber			
Omni Community Credit Union	Describe the property that secures	the claim:	\$31,599.00	\$21,213.00	\$10,386.00
Creditor's Name  PO Box 1537  Battle Creek, MI 49016	2015 Dodge Durango 40000 KBB Value. Good Condition Acquisition Date: 8/18/2016 As of the date you file, the claim is apply.	n. 5.			
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as car loan)	mortgage or secur	red		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Purchase Mo	oney Security		
8/2016 Statement Date debt was incurred Date.	Last 4 digits of account nun	nber 0087			
2.7 One Main Financial	Describe the property that secures	the claim:	\$7,973.93	\$1,058.00	\$6,915.93
Creditor's Name	2002 Dodge Durango 14000 KBB Value. Fair Condition. Acquisition Date: 12/20/201 As of the date you file, the claim is	3.			
6801 Colwell Blvd Irving, TX 75039	apply.				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as	mortgage or secur	red		
Debtor 2 only	car loan)  Statutory lien (such as tax lien, mo	achania'a lian)			
<ul><li>■ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Judgment lien from a lawsuit	scriatiic's ilett)			
Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account nun	nber 0802			
2.8 One Main Financial	Describe the property that secures	the claim:	\$14,854.19	\$7,053.00	\$7,801.19
Creditor's Name	2013 Chrylser 200 60000 m				
	KBB Value. Good Condition	າ.			
0004 Oakar !! D! -!	Acquisition Date: 5/6/2016.  As of the date you file, the claim is	: Check all that			
6801 Colwell Blvd Irving, TX 75039	apply.				
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated				
Number, Sueet, Oity, State & Zip Code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				

Debtor 1	Raymond Joseph	Otis, III		Case number (if know)	
	First Name	Middle Nam	e Last Name	-	
Debtor 2	Kristina Lynn Otis	S			
	First Name	Middle Nam	e Last Name	-	
_			_		
☐ Debtor	1 only	I	→ An agreement you made (such as n  or a such as n  or a	nortgage or secured	
☐ Debtor	2 only		car loan)		
Debtor	1 and Debtor 2 only	I	$\beth$ Statutory lien (such as tax lien, med	hanic's lien)	
☐ At least	one of the debtors and a	another <b>I</b>	Judgment lien from a lawsuit		
	if this claim relates to a unity debt	· [	☐ Other (including a right to offset)		
Date debt	was incurred		Last 4 digits of account numb	er	
Add the	dollar value of your ent	ries in Col	ımn A on this page. Write that numb	per here: \$138,995.2	3
	the last page of your fo at number here:	orm, add th	e dollar value totals from all pages.	\$138,995.2	3

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill	l in this informa	tion to identify your o	ase:					
	btor 1							
De	DIOI I	Raymond Joseph First Name		e Name Last Nam	<del></del>			
De	btor 2	Kristina Lynn Otis	;					
(Spo	ouse if, filing)	First Name	Middl	e Name Last Nam	Э			
Un	ited States Bank	ruptcy Court for the:	WESTER	N DISTRICT OF MICHIGAN				
Ca	se number							
(if k	nown)						_	eck if this is an
							am	ended filing
Of	ficial Form	106F/F						
			ho Hav	e Unsecured Claim	s			12/15
any Sch Sch left. nam	executory contra- edule G: Executor edule D: Creditors Attach the Contir le and case numb	cts or unexpired leases try Contracts and Unexpi s Who Have Claims Secu nuation Page to this page	that could r red Leases ured by Pro e. If you hav	creditors with PRIORITY claims a esult in a claim. Also list executo (Official Form 106G). Do not inclu perty. If more space is needed, co re no information to report in a Pa	ry contract ide any cre py the Part	s on Schedule A/B: P ditors with partially s you need, fill it out, I	roperty (Official ecured claims th number the entri	Form 106A/B) and on nat are listed in es in the boxes on the
		have priority unsecured						
	☐ No. Go to Par	12.						
	Yes.							
2.	identify what type possible, list the c	of claim it is. If a claim has laims in alphabetical orde	s both priorit r according	r has more than one priority unsecu y and nonpriority amounts, list that o to the creditor's name. If you have m , list the other creditors in Part 3.	laim here ar	nd show both priority a	nd nonpriority am	ounts. As much as
	(For an explanation	on of each type of claim, se	ee the instru	ctions for this form in the instruction	booklet.)	Total claim	Priority	Nonpriority
						Total claiiii	amount	amount
2.1		Accounts Receiva	ble	Last 4 digits of account number	9673	\$725.00	\$0.	.00 \$725.00
	Priority Credi PO Box 3			When was the debt incurred?	8/2016 1	Notice Date.		
	Lansing,	MI 48909					-	
		et City State ZIp Code he debt? Check one		As of the date you file, the claim	is: Check a	II that apply		
	_			Contingent				
	■ Debtor 1 only	•		☐ Unliquidated				
	Debtor 2 only	•		Disputed				
	Debtor 1 and	Debtor 2 only		Type of PRIORITY unsecured cla	ıim:			
	☐ At least one	of the debtors and anothe	r	☐ Domestic support obligations				
	☐ Check if this	s claim is for a commun	ity debt	Taxes and certain other debts y		=		
	Is the claim sul	oject to offset?		Claims for death or personal in	ury while yo	u were intoxicated		
	■ No □ Yes	canon epocal)						
	L res			2013 111001	ile Taxes	Due.		
2.2	Natalie N	. Sawyer		Last 4 digits of account number	0974	\$238.50	\$238.	.50 \$0.00
	Priority Cred	itor's Name		When was the debt incurred?	3/8/2011	l		
	Number Stre	et City State Zlp Code		As of the date you file, the claim	is: Check a	II that apply		
	Who incurred t	he debt? Check one.		☐ Contingent				
	■ Debtor 1 only □ Unliqui			☐ Unliquidated				
				☐ Disputed				
	Debtor 1 and			Type of PRIORITY unsecured cla	iim:			
		of the debtors and anothe	r	■ Domestic support obligations				
	☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government							
	Is the claim sul		,	☐ Claims for death or personal inj		-		
	■ No			Other. Specify				
	☐ Yes			Monthly Child Support Obligation.				

		Raymond Joseph Otis, III Kristina Lynn Otis		Case number (if know)			
Part	2:	List All of Your NONPRIORITY Unsecu	red Claims				
3. [	o any	v creditors have nonpriority unsecured claims	s against you?				
	□ No.	You have nothing to report in this part. Submit the	his form to the court with your other scho	edules.			
ı	Yes	S.	,				
u tl	ınsecu	of your nonpriority unsecured claims in the ured claim, list the creditor separately for each claim creditor holds a particular claim, list the other of	aim. For each claim listed, identify what	type of claim it is. Do not list claims already inc	cluded in Part 1. If more		
					Total claim		
4.1		7th Judicial Circuit Court	Last 4 digits of account number	0242	\$675.00		
	16	onpriority Creditor's Name 61 E. Michigan Ave attle Creek, MI 49014	When was the debt incurred?	7/2016 Billing Date.	-		
	Number Street City State Zlp Code  Who incurred the debt? Check one.		As of the date you file, the claim	is: Check all that apply			
		Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?		☐ Unliquidated				
			☐ Disputed				
			Type of NONPRIORITY unsecured claim:				
			☐ Student loans				
			Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
		No	Debts to pension or profit-sharing	g plans, and other similar debts			
		l Yes	Other. Specify Civil Judgr	nent collection account.	_		
4.2		llied Collection Group	Last 4 digits of account number		\$9.00		
		onpriority Creditor's Name <b>00 Allied Ct.</b>	When was the debt incurred?	Opened 3/2015.			
		eeland, MI 49464			_		
		umber Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
		ho incurred the debt? Check one.					
		Debtor 1 only	☐ Contingent				
		Debtor 2 only	☐ Unliquidated				
		Debtor 1 and Debtor 2 only	☐ Disputed				
		At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
		Check if this claim is for a community	☐ Student loans				
		ebt the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not			
		No	Debts to pension or profit-sharir	g plans, and other similar debts			
		] <sub>Yes</sub>	■ Other. Specify Health coll	,			
					_		

	1 Raymond Joseph Otis, III 2 Kristina Lynn Otis		Case number (if know)	
4.3	Bank of America Nonpriority Creditor's Name	Last 4 digits of account number		\$16,151.00
	PO Box 982235 El Paso, TX 79998	When was the debt incurred?	Opened 10/2006.	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured  ☐ Student loans	d claim:	
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims  Debts to pension or profit-sharin	a plans, and other similar debts	
	□ Yes	Other. Specify Credit Card	<del>-                                    </del>	
4.4	Battle Creek Health Systems	Last 4 digits of account number	66GC	\$331.00
	Nonpriority Creditor's Name C/O Atty. Edward Tenhouten PO Box 632	When was the debt incurred?	11/15/2013.	
	Cadillac, MI 49601  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Medical law	/suit	
4.5	Cadillac Accounts Receivable Nonpriority Creditor's Name	Last 4 digits of account number	ious	\$207.00
	1015 Wilcox Street Cadillac, MI 49601	When was the debt incurred?	2/20216 Balance Date.	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Co		
		- Other. Specify		

Debtoi Debtoi	Raymond Joseph Otis, III  Kristina Lynn Otis		Case number (if know)			
4.6	Capital One	Last 4 digits of account number	9466	\$730.00		
	Nonpriority Creditor's Name PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 3/2011.			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims				
	No	Debts to pension or profit-sharing				
	Yes	Other. Specify Credit Card	; Revolving.			
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number		\$524.00		
	PO Box 30281 Salt Lake City, UT 84130	When was the debt incurred?	Opened 3/2012.			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Credit Card	Other. Specify Credit Card; Revolving.			
4.8	Comenity Bank/Roamans	Last 4 digits of account number	8576	\$227.00		
	Nonpriority Creditor's Name PO Box 182789 Columbus, OH 43218	When was the debt incurred?	Opened 2/2012.			
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Credit Card	; Charged off.			

	1 Raymond Joseph Otis, III 2 Kristina Lynn Otis		Case number (if know)		
4.9	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$303.00	
	PO Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 6/2016.		
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	Contingent			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts		
	Yes	Other. Specify Credit Card	l; Revolving.		
4.1	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number		\$659.00	
	PO Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 9/2014.		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sens	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims	mation agreement of divorce that you do not		
	■ No	Debts to pension or profit-sharing			
	Yes	■ Other. Specify Credit Card; Revolving.			
4.1	Global Connections	Last 4 digits of account number	9950	\$3,405.00	
	Nonpriority Creditor's Name 5320 College Blvd. Leawood, KS 66211	When was the debt incurred?	Opened 3/2014.		
-	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Line of Cre	dit.		

Debtor Debtor	1 Raymond Joseph Otis, III 2 Kristina Lynn Otis	Case number (if know)		
4.1	JCC Christensen & Associates	Last 4 digits of account number	4660	\$7,287.00
	Nonpriority Creditor's Name PO box 519 South Popids MN 56370	When was the debt incurred?	7/2016 Notice Date.	
	Sauk Rapids, MN 56379  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	,	
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card	l collection account.	
4.1 3	JH Portfolio Debt  Nonpriority Creditor's Name	Last 4 digits of account number		\$79.00
	5757 Phantom Drive Hazelwood, MO 63042	When was the debt incurred?	Opened 6/2013.	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	<del>- ·</del>	
4.1	John and Carlene Everett	Last 4 digits of account number		Unknown
·	Nonpriority Creditor's Name 4170 Bristol Oak st.	When was the debt incurred?		
	Dowling, MI 49050  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	and the second of diverse that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify personal la	on	

Kohl's Capital One	Last 4 digits of account number	1518	\$343.00
Nonpriority Creditor's Name PO Box 3115 Milwaykoo WI 53201	When was the debt incurred?	Opened 11/2015.	
Milwaukee, WI 53201  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•	,	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Credit Card	d; Revolving.	
Matthew L. Glaser	Last 4 digits of account number		\$9,234.0
Nonpriority Creditor's Name 2510 Capital Ave SW Ste 2013 Battle Creek, MI 49015	When was the debt incurred?	8/2016 Notice Date.	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Attorney Fo	ees.	
Money Recovery Nationwide	Last 4 digits of account number	ious	\$76.0
Nonpriority Creditor's Name 8155 Executive Court, Suite 10 Lansing, MI 48917	When was the debt incurred?	Reported 8/2016.	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Medical Co	Mection Account	

Debtor Debtor	r 1 Raymond Joseph Otis, III r 2 Kristina Lynn Otis			
4.1 8	Money Recovery Nationwide	Last 4 digits of account number	357	\$497.00
	Nonpriority Creditor's Name 8155 Executive Court, Suite 10 Lansing, MI 48917	When was the debt incurred?	Reported 8/2016.	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Co	llection Account.	
4.1 9	Money Recovery Nationwide	Last 4 digits of account number	ious	\$3,682.00
	Nonpriority Creditor's Name 8155 Executive Court, Suite 10 Lansing, MI 48917	When was the debt incurred?	6/2016 Balance Date.	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical Co	llection Account.	
4.2	Money Recovery Nationwide  Nonpriority Creditor's Name	Last 4 digits of account number	36GC	\$5,181.00
	8155 Executive Court, Suite 10 Lansing, MI 48917	When was the debt incurred?	Opened 11/2015.	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane and other similer delete	
	■ No	Debts to pension or profit-sharin		
	☐ Yes	Other. Specify Medical co	llection account.	

Debtor 1 Raymond Joseph Otis, III Debtor 2 Kristina Lynn Otis			Case number (if know)		
	mmunity Credit Union	Last 4 digits of account number	0002	\$1,482.00	
PO Box 1		When was the debt incurred?	8/2016 Statement Date.		
	eek, MI 49016 eet City State ZIp Code	As of the date you file, the claim i	e. Chock all that apply		
	ed the debt? Check one.	As of the date you me, the claim i	<b>5.</b> Спеск ан так арру		
Debtor 1		☐ Contingent			
■ Debtor 2	only	☐ Unliquidated			
	and Debtor 2 only	☐ Disputed			
	one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
_	this claim is for a community	☐ Student loans			
debt	subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not		
■ No		☐ Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes		Other. Specify Personal S	ignature Loan.		
.2 One Mair	n Financial	Last 4 digits of account number	3418	\$8,085.00	
6801 Col		When was the debt incurred?	Opened 8/2014.	•	
	K 75039 eet City State Zlp Code ed the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
Debtor 1	only	☐ Contingent			
Debtor 2	only	☐ Unliquidated			
■ Debtor 1	and Debtor 2 only	☐ Disputed			
	one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	this claim is for a community	☐ Student loans			
debt	subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No		Debts to pension or profit-sharin	g plans, and other similar debts		
☐ Yes		Other. Specify Installment	Loan.		
.2 One Mair	n Financial	Last 4 digits of account number	2619	\$14,854.00	
6801 Col	Creditor's Name well Blvd	When was the debt incurred?	Opened 4/2016.		
Irving, TX	eet City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	ed the debt? Check one.	•			
Debtor 1	only	☐ Contingent			
Debtor 2	only	Unliquidated			
Debtor 1	and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans			
	one of the debtors and another				
	this claim is for a community				
debt	subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
■ No		Debts to pension or profit-sharing	g plans, and other similar debts		
☐ Yes		Other. Specify Installment	Loan Account.		

	Raymond Joseph Otis, III Kristina Lynn Otis		Case number (if know)	
4.2	Syncb/JC Pennys	Last 4 digits of account number	5567	\$447.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896	When was the debt incurred?	Opened 7/2015.	_
-	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Care	d; Revolving.	_
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed		
is tryir have n	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the collection agen	cy here. Similarly, if you
Name ar	nd Address	On which entry in Part 1 or Part 2 did you	ulist the original creditor?	
	istrict Court	Line <u>4.20</u> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Cl	aims
	Michigan Ave Creek, MI 49014		Part 2: Creditors with Nonpriority Unsecure	d Claims
Dallie	Creek, Wil 45014	Last 4 digits of account number	36GC	
Nama an	nd Address	On which entry in Part 1 or Part 2 did you	. Liet the existence are distance	
	istrict Court		I list the original creditor?  Part 1: Creditors with Priority Unsecured Cl.	aims
	Michigan Ave		Part 2: Creditors with Nonpriority Unsecure	
Battle	Creek, MI 49014	Last 4 digits of account number		
	nd Address • <b>Health</b>	On which entry in Part 1 or Part 2 did you Line <b>4.2</b> of ( <i>Check one</i> ):	ulist the original creditor? ☐ Part 1: Creditors with Priority Unsecured Cl	
	ewey Ave NW Ste 300		Part 1: Creditors with Priority Unsecured Ci	
	Rapids, MI 49504		Part 2: Creditors with Nonphority Unsecure	u Claims
		Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 did you		
Altran PO Bo	Financial LP		Part 1: Creditors with Priority Unsecured Cl	
	Rapids, MN 56379		Part 2: Creditors with Nonpriority Unsecure	d Claims
		Last 4 digits of account number		
	nd Address nesia Medical Consultants	On which entry in Part 1 or Part 2 did you Line <b>4.17</b> of ( <i>Check one</i> ):	u list the original creditor? Part 1: Creditors with Priority Unsecured Cl	aims
Dept 5		`	Part 2: Creditors with Nonpriority Unsecure	
	x 30322		. a z. c.canoro man nompriority chocoaro	
Lansın	ng, MI 48909	Last 4 digits of account number		
N	- d A ddg		. New Albar and all and disease	
	nd Address on Battle Creek Operating	On which entry in Part 1 or Part 2 did you Line <b>4.19</b> of ( <i>Check one</i> ):	I list the original creditor?  Part 1: Creditors with Priority Unsecured Cl	aime
	orth Avenue		Part 2: Creditors with Nonpriority Unsecured	
Battle	Creek, MI 49017	Last 4 digits of account number	. a.t z. oroanoro mur Honphonty onsecure	2 Samo
	nd Address on Methodist Hospital	On which entry in Part 1 or Part 2 did you Line <b>4.20</b> of ( <i>Check one</i> ):	•	a ima
	on Methodist Hospital hn Street		Part 1: Creditors with Priority Unsecured Cl. Part 2: Creditors with Nonpriority Unsecure	
	azoo, MI 49007		■ Fait 2: Creditors with ivonpriority Unsecure	u Ciaims
		Last 4 digits of account number		

Official Form 106 E/F

Debtor 1 Raymond Joseph Otis, III Debtor 2 Kristina Lynn Otis		Case number (if know)
Name and Address GE Capital Retail Bank 170 Election Road Suite 125 Draper, UT 84020	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims
•	Last 4 digits of account number	
Name and Address Independent Emergency Phys Oak 44405 Woodward Ave	On which entry in Part 1 or Part 2 did Line <b>4.18</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Pontiac, MI 48341		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	· <u> </u>
Law Office Barbara Tsaturova PO Box 2878	Line 4.20 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Holland, MI 49422		Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Name and Address LVNV Funding LLC	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims
PO Box 10497 Greenville, SC 29603		Part 2: Creditors with Nonpriority Unsecured Claims
Orcenvine, OO 23003	Last 4 digits of account number	
Name and Address M2 Revenue Group Dept 77313 PO Box 77000	On which entry in Part 1 or Part 2 did Line <b>4.17</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Detroit, MI 48277	Last 4 digits of account number	
Name and Address  Michigan Dept. of Treasury	On which entry in Part 1 or Part 2 did Line <b>2.1</b> of ( <i>Check one</i> ):	· <u> </u>
Office of Collections		■ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
PO Box 30199		a ran 2. Greditors with Northholity Onsecured Claims
Lansing, MI 48909	Last 4 digits of account number	
N		Part Control
Name and Address Radiology Consultants, PLC	On which entry in Part 1 or Part 2 did Line <b>4.5</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
5350 Beckley Road Ste C		Part 2: Creditors with Nonpriority Unsecured Claims
Battle Creek, MI 49015	Last 4 digits of account number	
	<u> </u>	
Name and Address Tenhouten Ringstrom PLLC	On which entry in Part 1 or Part 2 did Line <b>4.4</b> of ( <i>Check one</i> ):	you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims
PO Box 632	Line 444 of (Officer offe).	Part 2: Creditors with Nonpriority Unsecured Claims
Cadillac, MI 49601	Local delimina of account records	— Part 2. Creditors with Nonphority Offsecured Claims
	Last 4 digits of account number	
Name and Address	On which entry in Part 1 or Part 2 did	·
Veripro Solutions PO Box 3244	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Coppell, TX 75019		■ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number	
Part 4: Add the Amounts for Each Type	of Unsecured Claim	
		cal reporting purposes only. 28 U.S.C. §159. Add the amounts for each
type of unsecured claim.		
		Total Claim

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 238.50
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 725.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00

Debtor 1 Ra		Joseph Otis, III ynn Otis	Case number (if know)				
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	963.50		
Total	6f.	Student loans	6f.	\$	Total Claim 0.00		
claims from Part 2	6g. 6h. 6i.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Add all other nonpriority unsecured claims. Write that amount here.	6g. 6h. 6i.	\$ \$ \$	0.00 0.00 74,468.00		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	74,468.00		

Fill in this infor	mation to identify your	case:		
Debtor 1	Raymond Joseph	Otis, III		
	First Name	Middle Name	Last Name	
Debtor 2	Kristina Lynn Oti	S		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF MICHIGAN	
Case number				
(if known)				☐ Check if
				amended

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	,				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	- C,		Sidio		
-	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

		, 0		•	
Fill in thi	s information to identify yo	ur case:			
Debtor 1	Raymond Jose	enh Otis III			
	First Name	Middle Name	Last Name		
Debtor 2	Kristina Lynn (	Otis Middle Name	Last Name		
(Spouse if, fi	9)				
United St	ates Bankruptcy Court for the	e: WESTERN DISTRIC	F OF MICHIGAN		
Case nun	nber				
(if known)					Check if this is an amended filing
					amended lilling
Officia	al Form 106H				
Sche	dule H: Your Co	debtors			12/15
Cadabtar	a ara maanla ar antitiaa wh	a ara alaa liabla far any d	ahta way may haya. Ba sa	semulate and secur	ete ee maasible If ture married
					ate as possible. If two married needed, copy the Additional Page,
	and number the entries in t e and case number (if knov			this page. On the to	p of any Additional Pages, write
-	•	,			
1. Do	you have any codebtors?	(If you are filing a joint case	e, do not list either spouse a	as a codebtor.	
■ No	)				
□Y€	es				
2. Wi	thin the last 8 years, have y	ou lived in a community	property state or territory	? (Community propert	y states and territories include
	na, California, Idaho, Louisia				
■ No	o. Go to line 3.				
	es. Did your spouse, former s	pouse, or legal equivalent	ive with you at the time?		
3. In Co	olumn 1, list all of your code	ebtors. Do not include yo	ur spouse as a codebtor i	f your spouse is filin	g with you. List the person shown
					he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 2.	7 Jan 1 3 Jan	suale e (emolar rem rec	oj. Ose odnedale b,	Concade En , or Concade C to III
	Column 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	Name, Number, Street, City, State an	d ZIP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, lin	е
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street			-	
	City	State	ZIP Code		
				<b>—</b>	
3.2	Name			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street			-	<del></del>
	City	State	ZIP Code		

Fill in this information	tion to identify your case:	
Debtor 1	Raymond Joseph Otis, III	
Debtor 2 (Spouse, if filing)	Kristina Lynn Otis	
United States Bar	nkruptcy Court for the: WESTERN DISTRICT OF MICHIGAN	
Case number (If known)		Check if this is:  ☐ An amended filing ☐ A supplement showing postpetition chapter
Official Fo	rm 106l	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Associate	Server
	Include part-time, seasonal, or self-employed work.	Employer's name	Firekeepers Casino Hotel	Firekeepers Casino Hotel
	Occupation may include student or homemaker, if it applies.	Employer's address	11177 E Michigan Ave Battle Creek, MI 49014	11177 E Michigan Ave Battle Creek, MI 49014

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 3,385.55 \$ 5,497.79

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 3,385.55 \$ 5,497.79

	otor 1 otor 2	Raymond Joseph Otis, III Kristina Lynn Otis	-		Case	e number ( <i>if kr</i>	nown)				
					Fo	r Debtor 1		no	or Debtor		
	Cop	y line 4 here	4.		\$_	3,385	5.55	\$	5	,497.79	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$	785	5.37	\$	1	,229.39	
	5b.	Mandatory contributions for retirement plans	5b	).	\$	(	0.00	\$		164.95	-
	5c.	Voluntary contributions for retirement plans	5c	<b>:</b> .	\$	(	0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d	l.	\$_		0.00			148.05	-
	5e.	Insurance	5e		\$_		).51			168.22	-
	5f.	Domestic support obligations	5f.		\$_		7.60			0.00	-
	5g.	Union dues	5g		\$_		0.00			0.00	-
	5h.	Other deductions. Specify: Health Savings	_ 5h	1.+	\$ \$			+ \$		0.00	_
_		Dining			Ť –		7.67			61.75	-
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,256		-		,772.36	-
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,129	9.40	_ \$	3	,725.43	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	(	0.00	\$		0.00	
	8b.	Interest and dividends	8b		\$		0.00	- : -		0.00	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	<b>:</b> .	\$	(	0.00	\$		0.00	-
	8d.	Unemployment compensation	8d	ı.	\$		0.00			0.00	_
	8e.	Social Security	8e	<del>)</del> .	\$		0.00			0.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	8f. 8g		\$_ \$_		0.00			0.00	-
	8h.	Other monthly income. Specify:	_	, 1.+	\$			+ \$		0.00	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_ 9.		\$		0.00	- 1		0.00	- 
40	0-1	sulate manthly income. Add line 7 , line 0	40	Φ.		0.400.40			705 40		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		2,129.40	+ \$		3,725.43	= \$ _	5,854.83
11.	Stat Inclu other Do i	the all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your fir friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					•			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								\$Combin	
13.		you expect an increase or decrease within the year after you file this form	?							montnl	y income
		Yes. Explain:									

Fill	in this informa	ation to identify yo	our case:			1		
Deb	otor 1	Raymond Jo	seph Oti	s, III		Che	ck if this is:	
	Debtor 2 Kristina Lynn Otis Spouse, if filing)						An amended filing A supplement show 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bankr	ruptcy Court for the	: WESTE	ERN DISTRICT OF MICH	IGAN		MM / DD / YYYY	
	se number nown)							
		orm 106J	Evnor	200		-		4044
Be info	as complete ormation. If m	e <b>J: Your</b> and accurate as nore space is ne n). Answer ever	possible eded, atta	. If two married people a	are filing together, b s form. On the top o	oth are equ f any additi	ally responsible fo onal pages, write y	12/15 or supplying correct your name and case
Par		ribe Your House	hold					
1.	Is this a joir  ☐ No. Go to  ☐ Yes Doe	o line 2.	in a senar	ate household?				
	<b>■</b> N	lo	·	al Form 106J-2, <i>Expense</i>	es for Separate House	e <i>hold</i> of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		15 yrs	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses o	penses include if people other the d your depende	han nts? □	No Yes				☐ Yes
Est exp	imate your ex	a date after the l	our bankr	uptcy filing date unless				apter 13 case to report f the form and fill in the
the		h assistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses
4.		or home owners		nses for your residence.	Include first mortgag	e 4. \$	<b>.</b>	570.00
	If not includ	ded in line 4:						
	4b. Prope 4c. Home	estate taxes erty, homeowner's e maintenance, re eowner's associat	pair, and u	upkeep expenses		4a. \$ 4b. \$ 4c. \$ 4d. \$		0.00 0.00 150.00 0.00
5.	Additional r	mortgage payme	ents for ye	<b>our residence,</b> such as h	ome equity loans	5. \$	§	0.00

	aymond Joseph Otis, III ristina Lynn Otis	Case num	ber (if known)	
			,	
6. Utilities		0-	•	050.00
	ectricity, heat, natural gas	6a.	\$	250.00
	ater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services	6b.	· : ———	75.00
		6c.	·	350.00
	her. Specify: Water softener rent	6d.	· .	28.00
	d housekeeping supplies	7.	\$	850.00
	re and children's education costs	8. 9.	\$	150.00
	g, laundry, and dry cleaning		\$	150.00
	Il care products and services	10.	\$	115.00
	and dental expenses	11.	\$	150.00
	ortation. Include gas, maintenance, bus or train fare. Include car payments.	12.	\$	600.00
	nment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
	ble contributions and religious donations	14.	\$	0.00
5. Insuran	•		<u> </u>	0.00
	oclude insurance deducted from your pay or included in lines 4 or 20.			
15a. Li	e insurance	15a.	\$	15.00
15b. He	ealth insurance	15b.	\$	0.00
15c. Ve	ehicle insurance	15c.	\$	560.00
15d. O	her insurance. Specify: Life insurance and car/trailer insurance			
	combined	15d.	\$	560.00
6. <b>Taxes.</b> [	Oo not include taxes deducted from your pay or included in lines 4 or 20.		-	
Specify:		16.	\$	0.00
	ent or lease payments:			
	ar payments for Vehicle 1	17a.	·	0.00
	ar payments for Vehicle 2	17b.	·	0.00
	her. Specify: Vacation Club	17c.	·	133.00
	her. Specify:	17d.	\$	0.00
	yments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
-	ayments you make to support others who do not live with you.	19.	Φ	0.00
Specify:	al property expenses not included in lines 4 or 5 of this form or on Sched		our Income	
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.	· ·	0.00
	operty, homeowner's, or renter's insurance	20c.		0.00
	aintenance, repair, and upkeep expenses	20d.	·	0.00
	omeowner's association or condominium dues	20e.	· -	0.00
1. Other: S			+\$	150.00
i. Other. c	peony. <u>Fet expenses</u>		ΓΨ	130.00
<ol><li>Calculat</li></ol>	e your monthly expenses			
22a. Add	I lines 4 through 21.		\$	4,956.00
22b. Cop	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	l line 22a and 22b. The result is your monthly expenses.		\$	4,956.00
0 0-1				
	re your monthly net income.	23a.	<b>c</b>	E 0E4 02
	ppy line 12 (your combined monthly income) from Schedule I.		·	5,854.83
23D. C	ppy your monthly expenses from line 22c above.	23b.	-ф	4,956.00
230 81	ubtract your monthly expenses from your monthly income.			
	ne result is your <i>monthly net income</i> .	23c.	\$	898.83
11	io rodat to your monany not moonto.		1	
For exam	expect an increase or decrease in your expenses within the year after you ole, do you expect to finish paying for your car loan within the year or do you expect your ron to the terms of your mortgage?			se or decrease because of a
■ No.				
☐ Yes.	Explain here:			

Fill in this inforn	nation to identify your	case:		
Debtor 1	Raymond Joseph	Otis. III		
	First Name	Middle Name	Last Name	
Debtor 2	Kristina Lynn Otis			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	WESTERN DISTRICT	OF MICHIGAN	
Case number _				
(if known)				☐ Check if this is an amended filing
f two married pe You must file this obtaining money	eople are filing togethers	r, both are equally resp ile bankruptcy scheduk n connection with a bal		
Sigr	n Below			
Did you pay	y or agree to pay some	one who is NOT an atto	orney to help you fill out bank	cruptcy forms?
■ No				
☐ Yes. N	Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	Ity of perjury, I declare e true and correct.	that I have read the sur	mmary and schedules filed w	ith this declaration and
X /s/ Rav	mond Joseph Otis, I	Ш	X /s/ Kristina Ly	vnn Otis
	ond Joseph Otis, III	<del></del>	Kristina Lynn	
Signatur	re of Debtor 1		0'	
			Signature of Deb	otor 2

Debtor 1 Raymond Joseph Otis, III   Debtor 2   Raymond Joseph Otis, III   Debtor 2   Rist Burne   Debtor 3   Raymond Joseph Otis, III   Debtor 4   Raymond Joseph Otis, III   Debtor 5   Rist Burne   Debtor 6   Raymond Joseph Otis, III   Debtor 7   Rist Burne   Debtor 8   Debtor 9   Debtor 1   Debtor 9   Debtor 9   Debtor 9   Debtor 9   Debtor 9   Debtor 1   Debtor 9   Debtor 9   Debtor 1   Debtor 9   Debt	Filli	n this inform	nation to identify you	r case.			
Debtor 2   Kristina Lynn Otis   Last Name   Last Name   Kristina Lynn Otis   Price Name   Last Name							
United States Bankruptoy Court for the: WESTERN DISTRICT OF MICHIGAN  Case number (If known)    Check if this is an amended filling  Official Form 107  Statement of Financial Affairs for Individuals Filling for Bankruptcy  4/16  Bas a complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normaling. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Answer every question.				· · · · · · · · · · · · · · · · · · ·	Last Name		
United States Bankruptcy Court for the: WESTERN DISTRICT OF MICHIGAN  Case number   Case number   Case number   Check if this is an amended filing    Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  36 as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  27 In the last 3 years, have you lived anywhere other than where you live now?  And the syour current marital status?  Married   Not married    During the last 3 years, have you lived anywhere other than where you live now?  Debtor 1 Prior Address:   Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there    Debtor 1 Prior Address:   Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No   Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income    Did you have any income from employment or from operating a businesse, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No   Yes. Fill in the details.  Debtor 1   Sources of Income   Check all that apply.   Checked all that					Last Name		
Case number   Check if this is an amended filing				WESTERN DISTRICT O			
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  What is your current marital status?  Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Dived there  Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1 Sources of income Check all that apply. Geros income Check all that apply. Sources of			.,.,				
Statement of Financial Affairs for Individuals Filing for Bankruptcy  3rd as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married Not married  During the last 3 years, have you lived anywhere other than where you live now?  Debtor 1 Prior Address: Dates Debtor 1   Debtor 2 Prior Address: Dates Debtor 2   lived there  S. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Lift you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income (Check all that apply. Check all that apply. (before deductions and exclusions) and exclusions and exclusions bonuses, tips  Debtor 2 Sources of income (Check all that apply. (before deductions and exclusions) and exclusions bonuses, tips		_				_	
What is your current marital status?    Married	Sta Be as	tement	of Financial	ble. If two married people	are filing together, both are	equally responsible for sup	plying correct
What is your current marital status?					this form. On the top of any	y additional pages, write you	ir name and case
Married Not married During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Dived there  Debtor 2 Prior Address: Dates Debtor 2 Dived there  Mithin the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips	Part	1: Give I	Details About Your Ma	rital Status and Where You	ı Lived Before		
During the last 3 years, have you lived anywhere other than where you live now?    No	1.	What is you	r current marital statu	s?			
Pebtor 1 Prior Address: Dates Debtor 1 lived there  Button 1 Prior Address: Dates Debtor 1 lived there  Button 2 Prior Address: Dates Debtor 2 lived there  Button 2 Prior Address: Dates Debtor 2 lived there  Button 3 Prior Address: Dates Debtor 2 lived there  Button 4 Prior Address: Dates Debtor 2 lived there  Button 5 Prior Address: Dates Debtor 2 lived there  Button 6 Prior Address: Dates Debtor 2 lived there  Button 7 Prior Address: Dates Debtor 2 lived there  Button 8 Prior Address: Dates Debtor 2 lived there  Button 8 Prior Address: Dates Debtor 2 lived there  Button 9 Prior Address: Dates Debtor 2 lived there  Button 9 Prior Address: Dates Debtor 9 lived there  Button 9 Prior Address: Dates Debtor 9 lived there  Button 9 Prior Address: Dates Debtor 9 lived there  Button 9 Prior Address: Dates Debtor 9 lived there Dates Debtor 1 lived there  Button 9 Prior Address: Dates Debtor 9 lived there Dates Debtor 1 lived there Debtor 1 lived there Debtor 1 lived there Debtor 2 lived there Sources of income Check all that apply. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 3 Sources of income Check all that apply. Debtor 4 Sources of income Check all that apply. Debtor 5 Sources of income Check all that apply. Debtor 6 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income Check all that apply. Debtor 9 Sources of income		_					
Yes. List all of the places you lived in the last 3 years. Do not include where you live now.    Debtor 1 Prior Address:   Dates Debtor 1   Debtor 2 Prior Address:   Dates Debtor 2   lived there	2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
lived there		_	st all of the places you li	ived in the last 3 years. Do n	ot include where you live now	<i>ı</i> .	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  S. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filled for bankruptcy:  Wages, commissions, bonuses, tips  \$49,550.38		Debtor 1 Pr	ior Address:		Debtor 2 Prior Ad	dress:	
□ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  □ No ■ Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  □ Wages, commissions, bonuses, tips  \$35,059.96 □ Wages, commissions, bonuses, tips							
Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  No  Sources of income Check all that apply.  Check all that apply.  Debtor 2  Sources of income Check all that apply.  Check all that apply.  Sources of income Check all that apply.  Check all that apply.  Sources of income Check all that apply.  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips		_					
i. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Debtor 2 Sources of income Check all that apply.  Gross income Check all that apply.  Wages, commissions, bonuses, tips  \$35,059.96  Wages, commissions, bonuses, tips		⊔ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$35,059.96  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips	Part	2 Expla	in the Sources of You	r Income			
Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 1 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$35,059.96 Wages, commissions, bonuses, tips  \$49,550.38		Fill in the tota	al amount of income yo	u received from all jobs and	all businesses, including part	time activities.	ndar years?
Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Wages, commissions, bonuses, tips  \$35,059.96  Wages, commissions, bonuses, tips  \$49,550.38			I in the details.				
Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  Wages, commissions, bonuses, tips  \$35,059.96  Wages, commissions, bonuses, tips  \$49,550.38				Dobtor 1		Dobtor 2	
From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$35,059.96 Wages, commissions, bonuses, tips  \$49,550.38				Sources of income	(before deductions and	Sources of income	(before deductions
				_	,	=	•
				• •		• •	

Official Form 107

		istina Lynn Otis	5, III	Cas	se number (if known)		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	ndar year: December 31, 2015 )	■ Wages, commissions, bonuses, tips	\$27,476.00	■ Wages, combonuses, tips	imissions,	\$46,297.00
			☐ Operating a business		☐ Operating a	business	
		dar year before that: December 31, 2014)	■ Wages, commissions, bonuses, tips	\$27,475.69	■ Wages, combonuses, tips	ımissions,	\$46,296.59
			☐ Operating a business		☐ Operating a	business	
	List each	, , ,	ase and you have income that y		•		
			Debtor 1		Debtor 2		_
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pavments Yo	u Made Before You Filed for	Bankruptcv			
5.	□ No.	Neither Debtor 1 nor individual primarily for During the 90 days be No. Go to line Yes List below paid that continct include Subject to adjustme  Debtor 1 or Debtor 2 During the 90 days be  No. Go to line Yes List below include parattorney for	r each creditor to whom you pai creditor. Do not include paymer e payments to an attorney for the int on 4/01/19 and every 3 year or both have primarily consu- fore you filed for bankruptcy, di 7. If each creditor to whom you pai ayments for domestic support of or this bankruptcy case.	Imer debts. Consumer debted purpose."  d you pay any creditor a total d a total of \$6,425* or more the for domestic support oblinis bankruptcy case. Is after that for cases filed or imer debts.  d you pay any creditor a total d a total of \$600 or more an bligations, such as child support and total of \$600 or more an bligations, such as child support in the purpose of the purpose	al of \$6,425* or mo in one or more pay gations, such as character the date of all of \$600 or more?	re?  ments and the support and	ne total amount you nd alimony. Also, do creditor. Do not nclude payments to an
	Creditor	's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
	PO Box	America 31785 FL 33631	July, August a September 20 Mortgage Payments.		\$68,949.00	■ Mortgag □ Car □ Credit C □ Loan Re □ Supplier □ Other	Card

		mond Joseph Otis, III stina Lynn Otis		Cas	se number (if known		
7.	Insiders inc	ear before you filed for bankru lude your relatives; any general u are an officer, director, persor you operate as a sole proprieto	Il partners; relatives of any on in control, or owner of 20%	general partners; partne % or more of their votin	erships of which y g securities; and a	ou are a genera any managing a	al partner; corporations gent, including one fo
	□ No						
	Yes. L	ist all payments to an insider.					
	Insider's N	Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	4170 Bris	I Carlene Everett stol Oak st. MI 49050	Various	\$600.00	Unknown	Repaymer	nt on Loan
8.	insider?	ear before you filed for bankruments on debts guaranteed or		payments or transfer a	any property on a	account of a de	ebt that benefited an
	■ No □ Yes. L	ist all payments to an insider					
		Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Ident	ify Legal Actions, Repossess	sions, and Foreclosures				
	List all such modification  No	ear before you filed for bankru matters, including personal injus, and contract disputes. ill in the details.					
	Case title	ber	Nature of the case	Court or agency		Status of th	e case
	Bronson Bronson Inc., Bro	Methodist Hospital, Battle Creek Laboratories nson Healthcare Midwest and Joseph Otis III.		10th District C 161 E. Michiga Battle Creek, M	n Ave	☐ Pending ☐ On appe ☐ Conclude  Judgment	
		prinfield Income Tax ent v. Raymond Otis III SC	Debt Collection.	10th District C 161 E. Michiga Battle Creek, N	n Ave	☐ Pending ☐ On appe ☐ Conclude	al
						Satisfied J	Judgment.
10.		ear before you filed for bankru at apply and fill in the details be		operty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	_	o to line 11. ill in the information below.					
	Creditor N	lame and Address	Describe the Proper		Date		Value of the property
11.	accounts o	lays before you filed for bank or refuse to make a payment b ill in the details.		including a bank or fi	nancial institutio	n, set off any a	nmounts from your
		lame and Address	Describe the action	the creditor took	Date	action was	Amount
Offici	al Form 107	Sta	atement of Financial Affairs fo	or Individuals Filing for I	take Bankruptcy	n	page

	Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
	Omni Community Credit Union PO Box 1537 Battle Creek, MI 49016	Setoff of bank account  Last 4 digits of account number:7719	October 1, 2016	\$0.30
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or a	tcy, was any of your property in the possession of an another official?	assignee for the bend	efit of creditors, a
	■ No			
	☐ Yes			
Par	rt 5: List Certain Gifts and Contributions			
3.	Within 2 years before you filed for bankru	otcy, did you give any gifts with a total value of more	than \$600 per person	?
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
<b>4</b> .	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift or contains the c	otcy, did you give any gifts or contributions with a toto	tal value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value
Par	irt 6: List Certain Losses			
		tcy or since you filed for bankruptcy, did you lose an	ything because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	art 7: List Certain Payments or Transfers			
6.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pr	tcy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? eparers, or credit counseling agencies for services require		rty to anyone you
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Mapes Law 29 Pearl Street NW Ste 305 Grand Rapids, MI 49503 Mapesdebt.com	\$1000.00 for Chapter 13 Attorney/Filing Fees.	August 2016.	\$1,000.00

Debtor 1 Debtor 2	Raymond Joseph Otis, III Kristina Lynn Otis			Case number	(if known)	
Add	son Who Was Paid dress ail or website address son Who Made the Payment, if Not You	Description and variansferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
Cri 219 Po	cket Debt Counseling SW Stark Street Ste 200 rtland, OR 97204 cketdebt.com	\$22.00 for Cred	it Counseling.		August 2016.	\$22.00
pror	nin 1 year before you filed for bankrupto nised to help you deal with your credito not include any payment or transfer that yo	ors or to make payments			or transfer any propo	erty to anyone who
	No					
	Yes. Fill in the details.					
	son Who Was Paid dress	Description and variansferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
tran Inclu	in 2 years before you filed for bankrupt sferred in the ordinary course of your bude both outright transfers and transfers made gifts and transfers that you have alread No  Yes. Fill in the details.	ousiness or financial affa ade as security (such as	airs? the granting of a se			
Per	son Who Received Transfer	Description and v	value of	Describe	any property or	Date transfer was
Add	dress	property transfer			received or debts	made
	son's relationship to you	2 anouthourds		\$450 ata	ro orodit	Ootobor 2015
IVIC	Sports	2 snowboards		\$150 sto	re credit	October 2015
No	ne					
	nin 10 years before you filed for bankrupeficiary? (These are often called asset-pro		ny property to a se	elf-settled tru	ust or similar device	of which you are a
	Yes. Fill in the details.					
Nar	ne of trust	Description and v	value of the prope	erty transferr	ed	Date Transfer was made
Part 8:	List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Stor	rage Units		
sold Incli	nin 1 year before you filed for bankrupto , moved, or transferred? ude checking, savings, money market, o ses, pension funds, cooperatives, asso No	or other financial accou	nts; certificates o	of deposit; sh		
	Yes. Fill in the details.					
	ne of Financial Institution and dress (Number, Street, City, State and ZIP e)	Last 4 digits of account number	Type of accoun instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
505 MD	th Third Bank 50 Kingsley Drive # 1MOC2N acinnati, OH 45263	XXXX-4162	☐ Checking ☐ Savings ☐ Money Marke ☐ Brokerage ☐ Other_HSA	et	3/2016	\$5.09

	otor 1 Raymond Josep otor 2 Kristina Lynn Ot	·			Case numb	Der (if known)		
	Name of Financial Institu Address (Number, Street, City Code)		Last 4 digits of account number	Type of accou	unt or	Date account was closed, sold, moved, or transferred	Last bala before closin tran	g or
	PNC Bank		XXXX-2877	☐ Checking ■ Savings ☐ Money Marl ☐ Brokerage ☐ Other	ket	August 2016	\$0	0.00
21.	Do you now have, or did cash, or other valuables?		ear before you filed	for bankruptcy, an	ny safe dep	osit box or other depos	sitory for securitie	<b>≥</b> S,
	■ No							
	Yes. Fill in the detail	S.						
	Name of Financial Institu Address (Number, Street, City		Who else had a Address (Numbe State and ZIP Code)	er, Street, City,	Describe t	he contents	Do you still have it?	
22.	Have you stored property	in a storage unit o	r place other than yo	our home within 1	year before	e you filed for bankrupt	tcy?	
	No							
	☐ Yes. Fill in the detail	s.						
	Name of Storage Facility Address (Number, Street, City		Who else has o to it? Address (Numbe State and ZIP Code)	er, Street, City,	Describe t	he contents	Do you still have it?	
Par	rt 9: Identify Property Yo	ou Hold or Control	for Someone Fise					
23.	for someone.		neone else owns? In	nclude any propert	ty you borre	owed from, are storing	for, or hold in tru	st
	Yes. Fill in the detai	ls.						
	Owner's Name Address (Number, Street, City	, State and ZIP Code)	Where is the pr (Number, Street, Cit Code)		Describe t	he property	Va	alue
Par	t 10: Give Details About	Environmental Info	rmation					
For	the purpose of Part 10, the	e following definition	ons apply:					
	Environmental law means toxic substances, wastes regulations controlling th	, or material into th	e air, land, soil, surf	ace water, ground	• .			s or
	Site means any location, to own, operate, or utilize	,, , ,		ny environmental la	aw, whethe	er you now own, operat	e, or utilize it or u	sed
	Hazardous material mean hazardous material, pollu	, ,		es as a hazardous	waste, haz	ardous substance, tox	ic substance,	
Rep	ort all notices, releases, a	nd proceedings tha	t you know about, re	egardless of when	they occu	rred.		
24.	Has any governmental ur	nit notified you that	you may be liable or	potentially liable	under or in	violation of an enviror	nmental law?	
	■ No							
	☐ Yes. Fill in the detail	s.						
	Name of site Address (Number, Street, City	, State and ZIP Code)	Governmental Address (Numbe	unit er, Street, City, State and		nmental law, if you t	Date of notice	e:e

	tor 1 tor 2	Raymond Joseph Otis, III Kristina Lynn Otis				Ca	se number (if known)	
25.	Have	you notified any governmental unit of	any rel	lease of ha	azardous material?			
		No						
		Yes. Fill in the details.						
		ne of site ress (Number, Street, City, State and ZIP Code)	į	Governme Address (N ZIP Code)	ntal unit lumber, Street, City, State a	nd	Environmental law, if you know it	Date of notice
26.	Have	you been a party in any judicial or adı	ministra	ative proce	eeding under any env	/ironr	mental law? Include settlements	and orders.
		No Yes. Fill in the details.						
		e Title e Number	1	Court or act Name Address (N State and ZIP	lumber, Street, City,	Na	ture of the case	Status of the case
Part	11:	Give Details About Your Business or	Conne	ctions to A	Any Business			
27.	Withi	n 4 years before you filed for bankrup	tcy, did	you own	a business or have a	ny of	the following connections to any	y business?
		☐ A sole proprietor or self-employed i	in a trac	de, profess	sion, or other activity	, eith	er full-time or part-time	
		☐ A member of a limited liability comp	oany (Li	LC) or limi	ited liability partners	hip (L	.LP)	
		☐ A partner in a partnership						
		□ An officer, director, or managing ex	ecutive	of a corp	oration			
		☐ An owner of at least 5% of the votin		•		,		
		No. None of the above applies. Go to		-	moo or a corporation	•		
	_	• •			la fan aaab bainaa	_		
		Yes. Check all that apply above and fil iness Name			low for each busines		Employer Identification numbe	-
	Add	ress ber, Street, City, State and ZIP Code)			ntant or bookkeeper		Do not include Social Security	
	Otio	Ossis	Land	loooning	(not ourrently		Dates business existed EIN:	
	172	s Oasis 5 West Goguac St. tle Creek, MI 49015		ating)	(not currently		From-To 2010 - Present	
		n 2 years before you filed for bankrup utions, creditors, or other parties.	tcy, did	you give a	a financial statement	to ar	nyone about your business? Incl	ude all financial
	_	No Yes. Fill in the details below.						
	Nam Add		Date I	Issued				
Pari		Sign Below						
		· -		A 66-1			de alama con dan orang litera di manifere d	h - ( (h
are t with	rue a a bar	d the answers on this <i>Statement of Fii</i> nd correct. I understand that making a nkruptcy case can result in fines up to §§ 152, 1341, 1519, and 3571.	false s	tatement,	concealing property	, or o	btaining money or property by fra	
Ray	mon	nond Joseph Otis, III nd Joseph Otis, III e of Debtor 1		Kristin	stina Lynn Otis na Lynn Otis ure of Debtor 2			
Date	<b>O</b>	ctober 7, 2016		Date	October 7, 2016			
Did y ■ N		ttach additional pages to Your Stateme	ent of F	inancial A	ffairs for Individuals	Filin	g for Bankruptcy (Official Form 1	07)?

Official Form 107

Debtor 1 Debtor 2	Raymond Joseph Otis, III Kristina Lynn Otis	Case number (if known)	
□ Yes			
Did you pa	ay or agree to pay someone who is not an attorney	to help you fill out bankruptcy forms?	
■ No			
☐ Yes. Na	me of Person . Attach the Bankruptcy Petition F	Preparer's Notice, Declaration, and Signature (Officia	al Form 119).

Fill in this inforr	Fill in this information to identify your case:					
Debtor 1	Raymond Joseph Otis, III					
Debtor 2 (Spouse, if filing)	Kristina Lynn Otis					
United States E	Bankruptcy Court for the: Western District	of Michigan				
Case number						

Check	According to the calculations required by this Statement:  1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
Statement:  1. Disposable income is not determined under							
According to the calculations required by this Statement:  1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).  2. Disposable income is determined under 11							
	•						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						
	Check if this is an amended filing						

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ■ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 3,439.64 5,365.86 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not 0.00 0.00 filled in. Do not include payments you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Debtor 1 Debtor 2	Raymond Joseph Otis, III Kristina Lynn Otis			Case num	ber ( <i>if known</i> )		
				Column A Debtor 1		Column B Debtor 2 o	or
7. <b>Int</b>	terest, dividends, and royalties			\$	0.00	\$	0.00
	nemployment compensation			\$	0.00	\$	0.00
	o not enter the amount if you conte e Social Security Act. Instead, list		vas a benefit unde	er			
	For you	\$	0.00				
	For your spouse	\$	0.00				
9. <b>Pe</b>	ension or retirement income. Do enefit under the Social Security Ac	not include any amount receiv	ved that was a	\$	0.00	\$	0.00
Do red do	come from all other sources not o not include any benefits received ceived as a victim of a war crime, omestic terrorism. If necessary, list tal below.	I under the Social Security Act a crime against humanity, or ir	or payments nternational or				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separa	te pages, if any.	4	- \$	0.00	\$	0.00
	alculate your total average mont ach column. Then add the total for			3,439.64	+ \$	5,365.86	= \$ 8,805.50
Part 2:	Determine How to Measure	Your Deductions from Inco					Total average monthly income  \$ 8,805.50
	alculate the marital adjustment.						•
	You are not married. Fill in 0 be	elow.					
	You are married and your spou	se is filing with you. Fill in 0 be	elow.				
		se is not filing with you. se listed in line 11, Column B, th	at was NOT regul				
	Below, specify the basis for excadjustments on a separate pag	e.	nount of income de	evoted to ea	ch purpose.	If necessary	y, list additional
	If this adjustment does not app	ly, enter 0 below.	•				
			\$				
			+\$				
	Total		\$	0.	.00 Cop	y here=>	- 0.00
14. <b>Y</b>	our current monthly income. S	ubtract line 13 from line 12.					\$8,805.50
15. <b>C</b>	Calculate your current monthly i	ncome for the year. Follow th	nese steps:				
1	5a. Copy line 14 here=>						\$8,805.50
	Multiply line 15a by 12 (the r	number of months in a year).					<b>x</b> 12

Debtor 2	Kristina Lynn Otis		Case number (if known)		
16. <b>C</b> a	alculate the median family income that applies to yo	ou. Follow these	steps:		
16	Sa. Fill in the state in which you live.	MI	·		
	_	•	_		
	Sb. Fill in the number of people in your household.	3	_		6E 290 00
16	5c. Fill in the median family income for your state and six To find a list of applicable median income amounts, instructions for this form. This list may also be availa	go online using	the link specified in the separate	\$_	65,280.00
17. <b>H</b> o	ow do the lines compare?				
17	7a. ☐ Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do NC				
17	Zb. Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcularyour current monthly income from line 14 about 14 about 15 about 16 a	ation of Your D			
Part 3:	Calculate Your Commitment Period Under 11 U	.S.C. § 1325(b)(	4)		
18. <b>C</b> c	opy your total average monthly income from line 11			\$	8,805.50
19. <b>D</b> e	educt the marital adjustment if it applies. If you are nontend that calculating the commitment period under 11 bouse's income, copy the amount from line 13.	married, your spo	ouse is not filing with you, and you	·	
19	a. If the marital adjustment does not apply, fill in 0 on li	ne 19a.		-\$	0.00
19	9b. Subtract line 19a from line 18.			\$	8,805.50
20. <b>C</b> a	alculate your current monthly income for the year. F	Follow these ste	ps:		
20	Da. Copy line 19b			\$_	8,805.50
	Multiply by 12 (the number of months in a year).			3	<b>x</b> 12
20	0b. The result is your current monthly income for the yea	ar for this part of	the form	\$_	105,666.00
20	c. Copy the median family income for your state and si	ize of household	from line 16c	\$_	65,280.00
21	. How do the lines compare?				
	Line 20b is less than line 20c. Unless otherwise period is 3 years. Go to Part 4.	e ordered by the	court, on the top of page 1 of this form, c	heck box 3,	The commitment
	■ Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise or	dered by the court, on the top of page 1 o	f this form, c	heck box 4, The
Part 4:	Sign Below				
Ву	y signing here, under penalty of perjury I declare that the	e information on	this statement and in any attachments is	true and cor	rect.
x /	s/ Raymond Joseph Otis, III	•	X /s/ Kristina Lynn Otis		
F	Raymond Joseph Otis, III Signature of Debtor 1		Kristina Lynn Otis Signature of Debtor 2		
	ate October 7, 2016		Date October 7, 2016		
	MM / DD / YYYY		MM / DD / YYYY		
lf :	you checked 17a, do NOT fill out or file Form 122C-2.				

Raymond Joseph Otis, III

Debtor 1

						_			
Fil	l in this i	nformation to i	dentify your cas	se:					
De	btor 1	Raymond	Joseph Otis, I	II					
	btor 2 bouse, if f	Kristina L	ynn Otis						
Un	ited State	es Bankruptcy Co	ourt for the: We	stern District of Mi	ichigan				
	se numb known)	er					☐ Check if th	is is an amende	ed filing
		<sub>n 122C-2</sub> er 13 Calc	culation o	f Your Dis	sposable	Income			04/16
			Il need your com al Form 122C-1).		Chapter 13 Staten	nent of Your Curren	t Monthly Inco	me and Calcula	ion of
spa	ice is ne	eded, attach a s	eparate sheet to		de the line numb	gether, both are equ er to which addition			
Pa	rt 1:	Calculate Your	Deductions from	n Your Income					
,	the ques	tions in lines 6-	15. To find the IF		online using the	for certain expense e link specified in th			
	expenses	if they are highe	er than the standa	ards. Do not includ	de any operating e	pense. In later parts of xpenses that you sub it is income in line 13 of	otracted from inc	come in lines 5 a	
	If your ex	penses differ fro	m month to month	n, enter the averag	ge expense.				
	Note: Lin	e numbers 1-4 a	re not used in this	form. These num	nbers apply to info	rmation required by a	a similar form us	ed in chapter 7 c	ases.
	5. <b>The</b>	number of peop	ple used in deter	rmining your ded	luctions from inc	ome			
	plus	the number of a		endents whom yo		federal income tax re imber may be differen		3	
	National	Standards	You must us	e the IRS Nationa	al Standards to an	swer the questions in	lines 6-7.		
				ing the number of food, clothing, and		ed in line 5 and the IF	RS National	\$	1,249.00
	the o	dollar amount for ole who are 65 o	out-of-pocket he r olderbecause	alth care. The nun older people have	mber of people is s	entered in line 5 and split into two categoric wance for health car e 22.	espeople who	are under 65 and	l

Debtor 1 Debtor 2		Kaymond Joseph Otis, III  Kristina Lynn Otis			Case number (if k	nown)		
Peo	ple v	who are under 65 years of age						
	-	Out-of-pocket health care allowance per person	\$	54				
	7b.	Number of people who are under 65	x	3				
		Subtotal. Multiply line 7a by line 7b.	\$	162.00	Copy here=>	* \$	162.00	
Peo	ple v	who are 65 years of age or older						
	7d.	Out-of-pocket health care allowance per person	\$	130				
	7e.	Number of people who are 65 or older	X	0				
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	* \$	0.00	
	7g.	<b>Total.</b> Add line 7c and line 7f		\$	162.00	Сору	total here=>	\$162.00_
Loc	al Sta	andards You must use the IRS Local Standards to	answe	er the guestions in	lines 8-15.			
Bas	ed o	n information from the IRS, the U.S. Trustee Prog		•		for hous	sing for	
_	•	ing and utilities - Insurance and operating expens	ses					
		ing and utilities - Mortgage or rent expenses						
	arate Hou in th	rer the questions in lines 8-9, use the U.S. Trustee instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance a	e availa nses: (	able at the bankr Using the number	uptcy clerk's offi	ce.		pecified in the
9.		using and utilities - Mortgage or rent expenses:						
	9a.	Using the number of people you entered in line 5, fi listed for your county for mortgage or rent expenses		dollar amount		\$	863.00	
	9b.	Total average monthly payment for all mortgages a			y your home.			
		To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.						
		Name of the creditor		verage monthly ayment				
		Bank of America	\$	569.7	5			
		9b. Total average monthly paymen	t \$	569.7	Copy here=>	\$	569.75	Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.	_					
		Subtract line 9b (total average monthly payment) fro or rent expense). If this number is less than \$0, enter		9a ( <i>mortgage</i>	\$	293.2	Copy here=>	\$\$
10.		ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill				s incorre	ct and	\$
	Ex	xplain why:						

Raymond Joseph Otis, III

Debtor 1 Debtor 2		nond Joseph Otis, II ina Lynn Otis	II			Case nu	umber ( <i>if</i>	known)		
11.	Local tra	ansportation expenses	s: Check the number of vehic	cles for which	ch you claim	an own	nership	or operatin	g expense.	
	□ 0. Go	to line 14.								
	☐ 1. Go	to line 12.								
	■ 2 or m	nore. Go to line 12.								
12.			sing the IRS Local Standards perating Costs that apply for							382.00
13.	You may	ownership or lease ex not claim the expense n two vehicles.								
Ve	hicle 1	Describe Vehicle 1:	2002 Dodge Durango 1 Condition. Acquisition			lue. F	air			
13a	. Ownersh	ip or leasing costs usin	g IRS Local Standard			\$		471.00		
13b	•	monthly payment for al	I debts secured by Vehicle 1. vehicles.							
	are contr		ly payment here and on line 1 cured creditor in the 60 mont			t				
	Nan	ne of each creditor for	Average payment	•						
	On	e Main Financial		\$\$	146.16					
		Total A	Average Monthly Payment	\$	146.16	Copy		§ <u>14</u>	Repeat this amount on line 33b.	
13c		cle 1 ownership or leas line 13b from line 13a.	e expense if this number is less than \$0	, enter \$0.		. \$	S	324.84	Copy net Vehicle 1 expense here => \$	324.84
Ve	hicle 2	Describe Vehicle 2:	2013 Chrylser 200 6000 Acquisition Date: 5/6/20		(BB Value.	Good	Cond	dition.		
13d	. Ownersh	ip or leasing costs usin	g IRS Local Standard			\$		471.00		
13e	. Average leased ve	, , ,	I debts secured by Vehicle 2.	Do not inc	lude costs for	r				
	Nan	ne of each creditor fo	r Vehicle 2	Average payment	•					
	On	e Main Financial		\$\$	323.10					
		Total a	average monthly payment	\$	323.10	Copy here =>	, -\$	323.	Repeat this amount on line 33c.	
13f.		cle 2 ownership or leas line 13e from line 13d.	e expense if this number is less than \$0	, enter \$0.		\$	S	147.90	Copy net Vehicle 2 expense here => \$	147.90
14.			e: If you claimed 0 vehicles e allowance regardless of v						in the \$	0.00
15.	also ded	uct a public transportati	on expense: If you claimed 1 ion expense, you may fill in weal Standard for <i>Public Trans</i>	hat you bel						0.00

Debtor 1 Debtor 2 Raymond Joseph Otis, III Kristina Lynn Otis Case number (if known)

Oth	er Neces	ssary Expenses	In addition to the expense of the following IRS categories		ns listed above	, you are allowed your monthly expense	s for	
16.	self-em your pa and sub	ployment taxes, soc y for these taxes. H	cial security taxes, and Medio cowever, if you expect to rece com the total monthly amoun	care taxe	es. You may inc x refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,995.14
17.		ntary deductions: Tutions, union dues, a	The total monthly payroll ded and uniform costs.	luctions t	hat your job re	quires, such as retirement		
	Do not	include amounts tha	at are not required by your jo	b, such	as voluntary 40	1(k) contributions or payroll savings.	\$	148.05
18.	filing to Do not	gether, include payr	ments that you make for you or life insurance on your dep	r spouse	's term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	1.07
19.	adminis	strative agency, sucl	The total monthly amount the as spousal or child support past due obligations for sp	t paymei	nts.	by the order of a court or  You will list these obligations in line 35.	\$	237.60
20.	. Education: The total monthly amount that you pay for education that is either required:							
	_	condition for your jo	•	c -1-9-1-9	and the Control of th	artan da assartable famatastan sandasa	¢	0.00
0.4	for your physically or mentally challenged dependent child if no public education is available for similar services						\$	
21.	. <b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.							0.00
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.							0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.  Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.							100.00
24.		of the expenses a es 6 through 23.	llowed under the IRS expe	ense allo	wances.		\$	5,586.85
Add		Expense Deduction	These are additional of Note: Do not include a					
25.	insuran					<b>ises.</b> The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health	insurance		\$	156.01			
	Disabili	ty insurance		\$	124.29			
	Health	savings account	-	+ \$	65.00	_		
	Total			\$	345.30	Copy total here=>	\$	345.30
	_ ′	actually spend this		,		_		
	_	No. How much do y	ou actually spend?	\$				
26.	Continu continu your ho	e to pay for the reas susehold or member	sonable and necessary care	or family and sup no is una	port of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the		
	safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.  By law, the court must keep the nature of these expenses confidential.							

btor 1 btor 2	Raymond Joseph Otis, III Kristina Lynn Otis	Case number (if known)			
	Additional home energy costs. Your hom ine 8.	e energy costs are included in your insurance and operating ex	penses on		
	If you believe that you have home energy c B, then fill in the excess amount of home er	osts that are more than the home energy costs included in expenergy costs	enses on lir	ne	
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the addi ary.	tional	\$_	0.00
;	Education expenses for dependent child \$160.42* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly expenses (not more pendent children who are younger than 18 years old to attend a	ore than a private or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the ar not already accounted for in lines 6-23.	nount		
,	Subject to adjustment on 4/01/19, and ever	ery 3 years after that for cases begun on or after the date of adj	ustment.	\$_	0.00
I	Additional food and clothing expense. This had the combined food and clothing than 5% of the food and clothing allowance				
		ional allowance, go online using the link specified in the separa so be available at the bankruptcy clerk's office.	te		
,	You must show that the additional amount of	claimed is reasonable and necessary.		\$	43.00
	Continuing charitable contributions. The nstruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash inization. 11 U.S.C. § 548(d)(3) and (4).	or financial		
I	Do not include any amount more than 15%	of your gross monthly income.		\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	388.30
	ations for Dobt Downsont				
33. <b>F</b>	pans, and other secured debt, fill in lines	_			
33. <b>F</b> lo	or debts that are secured by an interest ans, and other secured debt, fill in lines	33a through 33e. ent, add all amounts that are contractually due to each secured			je monthly
33. <b>F</b> (	or debts that are secured by an interest cans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home	33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	I	payme	nt
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33. F. Id. T. c	or debts that are secured by an interest cans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.	=>	payme	569.75
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33. File Colors 133 a. 335. 336. 336. 336.	or debts that are secured by an interest bans, and other secured debt, fill in lines of calculate the total average monthly paymeditor in the 60 months after you file for band Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here	and all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  Identify property that secures the debt  Does include	=>	\$	569.75 146.16
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33. File Colors 133 a. 335. 336. 336. 336.	or debts that are secured by an interest cans, and other secured debt, fill in lines of calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts:	and all amounts that are contractually due to each secured inkruptcy. Then divide by 60.  Identify property that secures the debt  Does include or ins	payment de taxes surance? No Yes No Yes Cop	\$\$  \$\$	569.75 146.16

ebtor 1 ebtor 2		mond Joseph Otis, III tina Lynn Otis			Ca	ase r	number ( <i>if known</i> )			
			ne 33 secured by your prin			le,				
	No.	Go to line 35.								
	Yes.		u must pay to a creditor, in a ossession of your property ( in the information below.							
Name	of the	creditor	Identify property that secu	ures the d	ebt	Т	otal cure amount		Monthly	
David	£ A	i	1725 West Goguac S 49015 Calhoun Cou Primary Residence. Zillow/SEV x 2.	nty Value =	:		500.00			
Bank	COT A	merica	Acquisition Date: 11	/16/200		\$ \$	580.00	÷ 60 = ÷ 60 =		9.67
			-			φ - \$ -		÷ 60 =		
						Ē		Cop		
					Tota	۱   \$	9.67	tota	e=> \$	9.67
Cu	<b>ojecte</b> rrent n	ongoing priority claims, su Total amount of all past- d monthly Chapter 13 pla nultiplier for your district as	n payment stated on the list issued by	e 19. the Admi	nistrative	\$		_	60 \$_	3.98
the To	Exec	utive Office for United State state of district multipliers that inc	or districts in Alabama and Nes Trustees (for all other dist ludes your district, go online using st may also be available at the b	ricts). ng the link	specified in the	Х	6.50	Copy	total	
Ave	erage	monthly administrative exp	ense				\$169.00	here=		169.00
		of the deductions for del es 33e through 36.	ot payment.						\$	1,221.66
Total [	Deduc	tions from Income								
38. <b>Ad</b>	d all c	of the allowed deductions	<b>5.</b>							
		ne 24, All of the expenses a e allowances	allowed under IRS	\$_	5,586.8	35				
С	opy lir	ne 32, All of the additional e	expense deductions	\$_	388.3	80				
С	opy lir	ne 37, All of the deductions	for debt payment	+\$_	1,221.6	6_	$\neg$			
To	otal de	eductions		\$_	7,196.8	31	Copy total here=>	>	\$	7,196.81

btor 1 btor 2		ond Jose a Lynn (	eph Otis, III Otis				Cas	se nun	nber ( <i>if known</i> )		
rt 2:	Deteri	mine You	r Disposable Income U	nder 11 U.S.C. § 13	25(b	)(2)					
			ent monthly income fro Current Monthly Income							\$	8,805.50
<b>chi</b> disa rec	<b>Idren.</b> The ability pare eived in a	he monthly syments fo accordance	ly necessary income yo y average of any child su or a dependent child, repo ce with applicable nonbar anded for such child.	pport payments, for orted in Part I of Forn	ter c n 12	are payment 2C-1, that yo	ts, or ou	9	5 C	0.00	
em in 1	ployer wi 1 U.S.C.	ithheld fro . § 541(b)(	etirement deductions. The wages as contributions (7) plus all required repay § 362(b)(19).	s for qualified retirem	ent	plans, as sp	ecified	9	s	0.00	
2. <b>Tot</b>	al of all	deductio	ns allowed under 11 U.S	S.C. § 707(b)(2)(A).	Сор	y line 38 her	e =:	> \$	7,196	3.81	
exp the	enses ai ir expens	nd you ha ses. You r	al circumstances. If spe ve no reasonable alterna nust give your case truste ocumentation for the expe	tive, describe the sp ee a detailed explana	ecia	l circumstan		d			
escri	be the s	pecial cir	cumstances			Amount o	of expe	ense			
-						\$			_		
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-						\$			_		
				Total	\$_		0.00		opy ere=> \$ 	0.00	
4. Tot	al adjus	stments. A	Add lines 40 through 43.				=> {	\$	7,196.81	Copy here=> -\$	7,196.81
			thly disposable income	under § 1325(b)(2).	Sul	otract line 44	from li	ine 3	39.	\$	1,608.69
hav time you	ange in i re change e your ca i filed you	income o ed or are ase will be ur petition	r expenses. If the incomvirtually certain to change open, fill in the informati, check 122C-1 in the firs n when the increase occur	e after the date you f on below. For examp t column, enter line :	iled ole, 2 in	your bankru f the wages the second c	ptcy pe reporte olumn	etition ed in , exp	n and during the creased after		
orm	Li	ine	Reason for change			Date of o	change		Increase or decrease?	Amount of	change
1220	C-2								☐ Increase ☐ Decrease ☐ Increase	\$	
	<b>/-</b> 1								☐ Increase	\$	
1220										Ψ	
☐ 1220 ☐ 1220	C-1								☐ Increase ☐ Decrease	\$	
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-1 C-2 C-1							_	☐ Increase	·	

Debtor 1 Debtor 2	Raymond Joseph Otis, III Kristina Lynn Otis	Case number (if known)
Part 4:	Sign Below	
		that the information on this statement and in any attachments is true and correct.
X	/s/ Raymond Joseph Otis, III Raymond Joseph Otis, III Signature of Debtor 1	X /s/ Kristina Lynn Otis Kristina Lynn Otis Signature of Debtor 2
Date	October 7, 2016 MM / DD / YYYY	Date October 7, 2016 MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy\_form

s.html#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

## **United States Bankruptcy Court** Western District of Michigan

	Raymond Joseph Otis, III			
In re	Kristina Lynn Otis		Case No.	
		Debtor(s)	Chapter	13
The ab	, ———	TICATION OF CREDITOR		of their knowledge.
Date:	October 7, 2016	/s/ Raymond Joseph Otis, III Raymond Joseph Otis, III Signature of Debtor		
Date:	October 7, 2016	/s/ Kristina Lynn Otis Kristina Lynn Otis		

Signature of Debtor

10TH DISTRICT COURT 161 E. MICHIGAN AVE BATTLE CREEK MI 49014

37TH JUDICIAL CIRCUIT COURT 161 E. MICHIGAN AVE BATTLE CREEK MI 49014

AGILITY HEALTH
607 DEWEY AVE NW STE 300
GRAND RAPIDS MI 49504

ALLIED COLLECTION GROUP 400 ALLIED CT. ZEELAND MI 49464

ALTRAN FINANCIAL LP PO BOX 610 SAUK RAPIDS MN 56379

ANESTHESIA MEDICAL CONSULTANTS DEPT 5003 PO BOX 30322 LANSING MI 48909

BANK OF AMERICA PO BOX 982235 EL PASO TX 79998

BATTLE CREEK HEALTH SYSTEMS C/O ATTY. EDWARD TENHOUTEN PO BOX 632 CADILLAC MI 49601

BRONSON BATTLE CREEK OPERATING 300 NORTH AVENUE BATTLE CREEK MI 49017

BRONSON METHODIST HOSPITAL 601 JOHN STREET KALAMAZOO MI 49007

CADILLAC ACCOUNTS RECEIVABLE 1015 WILCOX STREET CADILLAC MI 49601

CAPITAL ONE PO BOX 30281 SALT LAKE CITY UT 84130

COMENITY BANK/ROAMANS PO BOX 182789 COLUMBUS OH 43218

CREDIT ONE BANK PO BOX 98873 LAS VEGAS NV 89193

DEPARTMENT OF THE TREASURY/IRS INTERNAL REVENUE SERVICE CINCINNATI OH 45999

DEPARTMENT OF THE TREASURY/IRS PO BOX 24035 FRESNO CA 93779

DEPARTMENT OF TREASURY/IRS STOP 6692 AUSC AUSTIN TX 73301

DITECH FINANCIAL LLC PO BOX 6172 RAPID CITY SD 57709

GE CAPITAL RETAIL BANK 170 ELECTION ROAD SUITE 125 DRAPER UT 84020

GLOBAL CONNECTIONS 5320 COLLEGE BLVD. LEAWOOD KS 66211

INDEPENDENT EMERGENCY PHYS OAK 44405 WOODWARD AVE PONTIAC MI 48341

JCC CHRISTENSEN & ASSOCIATES PO BOX 519
SAUK RAPIDS MN 56379

JH PORTFOLIO DEBT 5757 PHANTOM DRIVE HAZELWOOD MO 63042

JOHN AND CARLENE EVERETT 4170 BRISTOL OAK ST. DOWLING MI 49050

KOHL'S CAPITAL ONE PO BOX 3115 MILWAUKEE WI 53201

LAW OFFICE BARBARA TSATUROVA PO BOX 2878 HOLLAND MI 49422

LVNV FUNDING LLC PO BOX 10497 GREENVILLE SC 29603

M2 REVENUE GROUP DEPT 77313 PO BOX 77000 DETROIT MI 48277

MATTHEW L. GLASER 2510 CAPITAL AVE SW STE 2013 BATTLE CREEK MI 49015

MICHIGAN ACCOUNTS RECEIVABLE PO BOX 30149
LANSING MI 48909

MICHIGAN DEPT. OF TREASURY OFFICE OF COLLECTIONS PO BOX 30199 LANSING MI 48909

MONEY RECOVERY NATIONWIDE 8155 EXECUTIVE COURT, SUITE 10 LANSING MI 48917

NATALIE N. SAWYER

OMNI COMMUNITY CREDIT UNION PO BOX 1537
BATTLE CREEK MI 49016

ONE MAIN FINANCIAL 6801 COLWELL BLVD IRVING TX 75039

RADIOLOGY CONSULTANTS, PLC 5350 BECKLEY ROAD STE C BATTLE CREEK MI 49015

SEVENTH AVENUE 1112 7TH AVE MONROE WI 53566

SYNCB/JC PENNYS PO BOX 965036 ORLANDO FL 32896

SYNCB/SLEEP NUMBER PO BOX 965036 ORLANDO FL 32896

TENHOUTEN RINGSTROM PLLC PO BOX 632 CADILLAC MI 49601

VERIPRO SOLUTIONS PO BOX 3244 COPPELL TX 75019